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Fill in this information to identify your case:	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12
	Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name		
Write the name that government-issued p	oicture Staty	
identification (for exa	imple, First name	First name
your driver's license		
passport).	Middle name	Middle name
Bring your picture	Paris	
identification to your with the trustee.	meeting Last name	Last name
	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names y have used in the	I40	
years	First name	First name
Include your married maiden names.	or Middle name	Middle name
	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 dig your Social Secur	ity	1 <u>5</u> xxx - xx
number or federal		OR
Individual Taxpayo Identification num (ITIN)		9 xx - xx

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Stacy Ann Paris

Debtor 1

Debtor 1 Stacy ATT First Name Middle		Case number (#known)				
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
Any business names and Employer Identification Numbers (EIN) you have used in	☑ I have not used any business names or EINs.	☐ I have not used any business names or EINs.				
the last 8 years Include trade names and	Business name	Business name				
doing business as names	Business name	Business name				
	EIN	EIN				
	EIN	EIN				
Where you live		If Debtor 2 lives at a different address:				
	1904 Cumberland Street					
	Number Street	Number Street				
	Rockford IL 61103					
	Rockford IL 61103 City State ZIP Code	City State ZIP Code				
	Winnebago					
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
	Number Street	Number Street				
	P.O. Box	P.O. Box				
	City State ZIP Code	City State ZIP Code				
Why you are choosing	мент и пответствення потостой пот потостой пот	он indebtion that полити и посто об ответственного и постоя пост				
this district to file for pankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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Debtor 1 Stacy Ann Pa First Name Middle N	ATIS lame	Last Name			Case number (#	f known)
Part 2: Tell the Court Abo	out Your	Bankruptcy (Case			
The chapter of the Bankruptcy Code you	Check for Ban	one. (For a brie kruptcy (Form 2	f descríption of each 2010)). Also, go to th	n, see <i>Not</i> ne top of p	ice Required by 1 page 1 and check	1 U.S.C. § 342(b) for Individuals Filing the appropriate box.
are choosing to file under	☑ Cha	apter 7				
	☐ Cha	apter 11				
	☐ Cha	apter 12				
op til tillstaden som til stillstade halle som en som til stillstade som til still stillstade som til stillstade som til still stillstade som til still still stillstade som til still	☐ Cha	apter 13				
How you will pay the fee	loca you sub with	al court for mo rself, you may mitting your p n a pre-printed	re details about ho pay with cash, ca ayment on your be address.	ow you r ashier's ehalf, yo	nay pay. Typica check, or money ur attorney may	neck with the clerk's office in your ally, if you are paying the fee y order. If your attorney is y pay with a credit card or check
	☑ I ne	ed to pay the	fee in installmer	nts. If yo	u choose this o	ption, sign and attach the
	App	piication for inc	lividuals to Pay Tr	he I-iling	Fee in Installme	ents (Official Form 103A).
	By I less pay	aw, a judge m than 150% of the fee in inst	nay, but is not requ f the official povert allments). If you cl	uired to, ty line th hoose th	waive your fee, at applies to you nis option, you m	tion only if you are filing for Chapter 7 and may do so only if your income is ur family size and you are unable to nust fill out the Application to Have the with your petition.
Have you filed for	☑ No	Period Programme		. 10	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
bankruptcy within the last 8 years?	Yes.	District	+- 	When	MM / DD / YYYY	Case number
		District		When		Case number
		District			MM / DD / YYYY	_
		District	We then the second seco	When	MM / DD / YYYY	Case number
Are any bankruptcy	☑ No	A half and removes by an early by the contraction of the contraction o	Technique Programme (and an entre days and an analysis of the analysis and an advantage and advantage and an advantage and a		AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	
cases pending or being filed by a spouse who is	Yes.	Debtor				Relationship to you
not filing this case with you, or by a business partner, or by an affiliate?						Case number, if known
arrange i		Debtor				Relationship to you
						Case number, if known
Do you rent your residence?	□ No.	Go to line 12.	ord obtained an evic	tion judgr	ment against you a	and do you want to stay in your
		No. Go to i	ine 12.			
				bout an E	viction Judgment	Against You (Form 101A) and file it with
		this bankru	ptcy petition.			

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Are you a sole proprietor						
of any full- or part-time		Go to Part 4.				
business? A sole proprietorship is a	∟i Yes	. Name and location o	business			
business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if an				
If you have more than one sole proprietorship, use a separate sheet and attach it						
to this petition.		City	State ZIP Code			
		Check the appropriate	box to describe your business:			
			ess (as defined in 11 U.S.C. § 101(27A))			
		☐ Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
			efined in 11 U.S.C. § 101(53A))			
		Commodity Broker (as defined in 11 U.S.C. § 101(6))				
namon papaga (Arati aman aman aman papaga tahun kalan man man ang ang ang ang ang ang		None of the above				
Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	most recany of the	cent balance sheet, sta nese documents do not I am not filing under C	If you indicate that you are a small business debtor, you must attach your tement of operations, cash-flow statement, and federal income tax return or if exist, follow the procedure in 11 U.S.C. § 1116(1)(B). hapter 11. ter 11, but I am NOT a small business debtor according to the definition in			
	Yes.	Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
rt 4: Report if You Own	or Have	Any Hazardous Pro	perty or Any Property That Needs Immediate Attention			
Do you own or have any property that poses or is	No No					
alleged to pose a threat of imminent and identifiable hazard to public health or safety?	Yes.	What is the hazard?				
		If immediate attention	is needed, why is it needed?			
property that needs immediate attention?						
Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?						

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Debtor 1	Stacy /	Ann Paris Middle Name	Lest Name	Case number (# known)	
		WYCO10 1481149	Lest Name		

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	Debtor	1

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

Ц	I am not required	to receive a	briefing	abou
	credit counseling	because of:	;	

I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

i am	not	require	d to	receive	а	briefing	about
cred	lit co	ounselir	ia bi	ecause	of		

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Stacy Ann First Name Middle	Paris Name Last Name	Case number (# /	(nown)				
Part 6: Answer These C	uestions for Reporting Purp	oses					
16. What kind of debts do	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
you have?	No. Go to line 16b. Yes. Go to line 17.	No. Go to line 16b.					
	16b. Are your debts prim money for a business or	narily business debts? Business debts rinvestment or through the operation of the	s are debts that you incurred to obtain e business or investment.				
	No. Go to line 16c. Yes. Go to line 17.						
	16c. State the type of debts y	you owe that are not consumer debts or bu	isiness debts.				
17. Are you filing under Chapter 7?	☐ No. I am not filing under	Chapter 7. Go to line 18.	менти политирова до населения на постоя на по				
Do you estimate that aft any exempt property is excluded and administrative expenses are paid that funds will i available for distribution to unsecured creditors?	administrative expen	apter 7. Do you estimate that after any exe ses are paid that funds will be available to	mpt property is excluded and distribute to unsecured creditors?				
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000				
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	☐ \$1,000,001-\$10 million ☐ \$10,000,001-\$50 million ☐ \$50,000,001-\$100 million ☐ \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion				
eo. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion				
Part 7: Sign Below For you	I have examined this petition,	and I declare under penalty of perjury that	the information provided is true and				
or you	correct. If I have chosen to file under C of title 11, United States Code. under Chapter 7.	Chapter 7, I am aware that I may proceed, i . I understand the relief available under ea	if eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed				
	If no attorney represents me arthis document, I have obtained	nd I did not pay or agree to pay someone v I and read the notice required by 11 U.S.C	who is not an attorney to help me fill out . § 342(b).				
		vith the chapter of title 11, United States C	·				
	I understand making a false sta with a bankruptcy case can res 18 U.S.C. §§ 152, 1341, 1519,	sult in fines up to \$250,000, or imprisonme	money or property by fraud in connection nt for up to 20 years, or both.				
	Signature of Debtor 1	₩ Signature	of Debtor 2				
	Executed on 10/26/2016		on				

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				r545542455		
to proceed under Chapter 7, 11, 12, or 13 of titl available under each chapter for which the persthe notice required by 11 U.S.C. § 342(b) and,	e 11, United States Code, a son is eligible. I also certify t in a case in which \$ 707(b)(4	nd have hat I ha I)(D) ap	exp ve d	plain deliv s. ce	ed the relief ered to the debtor(s) edify that I have no	
knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.						
×	Date					
Signature of Attorney for Debtor	- Duite	MM	1	DD	/ / / / / / / / / / / / / / / / / / / /	
Printed name	. 17-18-18-18-18-18-18-18-18-18-18-18-18-18-			·		
Firm name	***************************************			~~~~		
Number Street						
City	State	7IP Co.				
•	Jud	211 00	46			
Contact phone	Email address					
	to proceed under Chapter 7, 11, 12, or 13 of titl available under each chapter for which the pers the notice required by 11 U.S.C. § 342(b) and, knowledge after an inquiry that the information Signature of Attorney for Debtor Printed name Number Street City	to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, at available under each chapter for which the person is eligible. I also certify the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4 knowledge after an inquiry that the information in the schedules filed with the Signature of Attorney for Debtor Printed name Firm name Number Street City State	to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have available under each chapter for which the person is eligible. I also certify that I ha the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) ap knowledge after an inquiry that the information in the schedules filed with the petitic signature of Attorney for Debtor Date Signature of Attorney for Debtor Printed name Number Street City State ZIP Co	to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have exavailable under each chapter for which the person is eligible. I also certify that I have of the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applie knowledge after an inquiry that the information in the schedules filed with the petition is Date	Signature of Attorney for Debtor Printed name Firm name Number Street City State ZIP Code	

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Debtor 1 Stacy Ann Pa First Name Middle N	A110	il Name	Case number (# known)				
For you if you are filing this bankruptcy without an attorney	should themse	understand that many people lives successfully. Because b	o represent yourself in bankruptcy court, but you a find it extremely difficult to represent trankruptcy has long-term financial and legal and to hire a qualified attorney.				
If you are represented by an attorney, you do not need to file this page.	technical dismisse hearing, firm if yo	To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.					
	in your so property also deny case, suc cases are	en if you plan to pay a particular of chedules. If you do not list a debt, or properly claim it as exempt, yo y you a discharge of all your debts ch as destroying or hiding propert e randomly audited to determine it	n the schedules that you are required to file with the debt outside of your bankruptcy, you must list that debt the debt may not be discharged. If you do not list but may not be able to keep the property. The judge can si fyou do something dishonest in your bankruptcy y, falsifying records, or lying. Individual bankruptcy if debtors have been accurate, truthful, and complete.				
	If you ded hired an a successfu Bankrupto	If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.					
	Are you a conseque	Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences? □ No					
	☑ Yes						
	inaccurate	Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?					
	☐ No ☑ Yes						
	Did you pa ☑ No ☑ Yes. Na	Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?					
	have read	and understood this notice, and I	stand the risks involved in filing without an attorney. I am aware that filing a bankruptcy case without an property if I do not properly handle the case.				
	* Ja	ay a. Paris	<u> </u>				
	Signature of		Signature of Debtor 2				
	Date	10/26/2016 MM / DD / YYYY	Date MM / DD / YYYY				
	Contact phon	6	Contact phone				
	Cell phone	(815) 222-9912	Cell phone				

Email address <u>stacyparis355@yahoo.com</u>

Email address

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Fill in t	his information to identify your case and th	is filing:		
	Stacy Ann Paris			
Debtor 1	First Name Middle Name	Last Name		
Debtor 2 (Spouse, i	if filing) First Name Middle Name	Last Name		
United S	states Bankruptcy Court for the: Northern District o			
		I HIRTOIS		
Case nu	mber		ļ	Check if this is an
				amended filing
Offic	cial Form 106A/B			
		L _		
<u>2CI</u>	nedule A/B: Propert	<u> </u>		12/15
categor respon write ye Part 1s	ry where you think it fits best. Be as compl sible for supplying correct information. If m our name and case number (if known). Answ Describe Each Residence, Building	is. List an asset only once. If an asset fits in more ete and accurate as possible. If two married people ore space is needed, attach a separate sheet to the wer every question. Land, or Other Real Estate You Own or Ha	le are filing together, b nis form. On the top of ve an Interest In	oth are equally
_	lo. Go to Part 2.	or in any residence, summing, and, or summin prop	orty :	
-	es. Where is the property?			
		What is the property? Check all that apply.	Do not deduct secured c	laims or exemptions. Put
1.1.	1800 17th Avenue	Single-family home		
****	Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative		cured claims or exemptions. Put a secured claims on Schedule Dave Claims Secured by Property. of the Current value of the portion you own? 0.00 \$ 41,315.00 ature of your ownership as fee simple, tenancy by
		Manufactured or mobile home	Current value of the entire property?	
		Land	\$ 82,630.00	s 41,315.00
	Rockford IL 61107	Investment property		
	City State ZIP Code	Timeshare Other Commercial Building		simple, tenancy by
		Who has an interest in the property? Check one.	Illinois Land Trust	Agreement
	Winnebago	Debtor 1 only Debtor 2 only		
	County	Debtor 1 and Debtor 2 only	Check if this is co	ommunity property
		■ At least one of the debtors and another	(see instructions)	
		Other information you wish to add about this it		
tf.co.	Assembled to the second state of the second st	property identification number: 11-36-133-0	04	
n you	own or have more than one, list here:	What is the property? Check all that apply.		anayay yana a saasa a
		Single-family home	Do not deduct secured cla the amount of any secure	
1.2.	Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clair	ms Secured by Property.
	of cot address, it available, or other description	Condominium or cooperative	Current value of the	Current value of the
		Manufactured or mobile home	entire property?	portion you own?
		Land Investment property	\$	\$
	O'	☐ Timeshare	Describe the nature of	
	City State ZIP Code	Other	interest (such as fee the entireties, or a life	
		Who has an interest in the property? Check one.		,,
		Debtor 1 only		
	County	Debtor 2 only	_	
		Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
		At least one of the debtors and another	(see instructions)	
		Other information you wish to add about this iter	n, such as local	

Official Form 106A/B

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1.3		ble, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building	Do not deduct secured of the amount of any secur Creditors Who Have Cla	red claims on <i>Schedule</i>
			Condominium or cooperative	Current value of the entire property?	Current value of portion you own
			Manufactured or mobile home	entire property r	portion you own
			☐ Land☐ Investment property	D	3
	City	State ZIP Code		Describe the nature	of your ownership
			Other	interest (such as fee the entireties, or a li	simple, tenancy b
			Who has an interest in the property? Check one.		
	County		Debtor 1 only		
	County		Debtor 2 only	C	
			Debtor 1 and Debtor 2 only		ommunity property
			At least one of the debtors and another	(see instructions)	
			Other information you wish to add about this it property identification number:	em, such as local	
	eta atauta da man				
id i su i	the dollar value of the have attached for Part	portion you own for	all of your entries from Part 1, including any entrie	es for pages	\$41,315
			***************************************	***************************************	
2: ou e	Describe Your own, lease, or have let that someone else drive	gal or equitable intere	est in any vehicles, whether they are registered or le, also report it on Schedule G: Executory Contracts	not? Include any vehicles and Unexpired Leases.	S
u e wn	own, lease, or have let that someone else drive vans, trucks, tractors	gal or equitable intere es. If you lease a vehic	le, also report it on Schedule G: Executory Contracts	not? Include any vehicle: and Unexpired Leases,	S
wn irs, N	own, lease, or have leg that someone else drive vans, trucks, tractors o es	gal or equitable intere es. If you lease a vehic	e, also report it on Schedule G: Executory Contracts s, motorcycles	and Unexpired Leases.	erane e e e e e e e e e e e e e e e e e e
u c vn rs, N	own, lease, or have let that someone else drive vans, trucks, tractors o es Make:	gal or equitable interests. If you lease a vehicles, sport utility vehicles	te, also report it on Schedule G: Executory Contracts s, motorcycles Who has an interest in the property? Check one.	and Unexpired Leases. Do not deduct secured clathe amount of any secured.	ims or exemptions. Pu
u (/n rs, N	own, lease, or have let that someone else drive vans, trucks, tractors o es Make: Model:	gal or equitable intereses. If you lease a vehicles, sport utility vehicles	e, also report it on Schedule G: Executory Contracts s, motorcycles	and Unexpired Leases. Do not deduct secured cla	ims or exemptions. Pu
u (/n 's, Ni Yi	that someone else driven vans, trucks, tractors o es Make: Model:	gal or equitable intereses. If you lease a vehicles, sport utility vehicles GMC Acadia 2009	who has an interest in the property? Check one.	and Unexpired Leases. Do not deduct secured clathe amount of any securec Creditors Who Have Clain Current value of the	ims or exemptions. Put claims on Schedule I ns Secured by Property Current value of t
u (n 'n 's, N	that someone else driventhat else else driventhat else else else else else else else els	gal or equitable intereses. If you lease a vehicles, sport utility vehicles	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	and Unexpired Leases. Do not deduct secured clathe amount of any securec Creditors Who Have Clain	ims or exemptions. Put claims on Schedule I ns Secured by Property Current value of t
u (/n 's, Ni Yi	that someone else driven vans, trucks, tractors o es Make: Model:	gal or equitable intereses. If you lease a vehicles, sport utility vehicles GMC Acadia 2009	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another	Do not deduct secured cla the amount of any securec Creditors Who Have Clain Current value of the entire property?	ims or exemptions. Put is claims on Schedule I ns Secured by Property Current value of t portion you own?
u (/n rs, N	that someone else driventhat else else driventhat else else else else else else else els	gal or equitable intereses. If you lease a vehicles, sport utility vehicles GMC Acadia 2009	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	and Unexpired Leases. Do not deduct secured clathe amount of any securec Creditors Who Have Clain Current value of the	ims or exemptions. Put is claims on Schedule I ns Secured by Property Current value of t portion you own?
u c vn rs, Ni Yi	that someone else driventhat else else driventhat else else else else else else else els	gal or equitable intereses. If you lease a vehicles, sport utility vehicles GMC Acadia 2009 160,000	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured cla the amount of any securec Creditors Who Have Clain Current value of the entire property?	ims or exemptions. Put is claims on Schedule I ns Secured by Property Current value of t portion you own?
u c vn rs, Vi	that someone else driven vans, trucks, tractors of es Make: Model: Year: Approximate mileage: Other information:	gal or equitable intereses. If you lease a vehicles, sport utility vehicles GMC Acadia 2009 160,000	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any securec Creditors Who Have Clain Current value of the entire property? \$ 5,215.00	ims or exemptions. Put claims on Schedule Los Secured by Property Current value of to portion you own? \$
u cyn rs, N Y	own, lease, or have leg that someone else drive wans, trucks, tractors o es Make: Model: Year: Approximate mileage: Other information:	gal or equitable intereses. If you lease a vehicle s, sport utility vehicles GMC Acadia 2009 160,000 one, describe here: Saturn	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any securec Creditors Who Have Clain Current value of the entire property? \$ 5,215.00 Do not deduct secured clathe amount of any secured	ims or exemptions. Put it claims on Schedule Line Secured by Property Current value of the portion you own? \$ 5,215.0 ms or exemptions. Put claims on Schedule D
u con rs, Ni Yi	that someone else driven vans, trucks, tractors of es Make: Model: Year: Approximate mileage: Other information: own or have more than Make: Model:	gal or equitable intereses. If you lease a vehicle s, sport utility vehicles GMC Acadia 2009 160,000 one, describe here: Saturn SL1	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ 5,215.00	ims or exemptions. Put it claims on Schedule Dissecured by Property Current value of t portion you own? \$ 5,215.0 ms or exemptions. Put claims on Schedule D
u con Ni Yi	that someone else driven wans, trucks, tractors of es Make: Model: Year: Approximate mileage: Other information: own or have more than Make: Model: Year:	gal or equitable intereses. If you lease a vehicle s, sport utility vehicles GMC Acadia 2009 160,000 one, describe here: Saturn SL1 2001	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any securec Creditors Who Have Claim Current value of the entire property? \$ 5,215.00 Do not deduct secured claithe amount of any secured Creditors Who Have Claim Current value of the	ims or exemptions. Put claims on Schedule Das Secured by Property Current value of t portion you own? \$ 5,215.0 ms or exemptions. Put claims on Schedule D. is Secured by Property. Current value of the contraction of th
u (vn vn Y)	own, lease, or have leg that someone else drive wans, trucks, tractors oes Make: Model: Year: Approximate mileage: Other information: own or have more than Make: Model: Year: Approximate mileage:	gal or equitable intereses. If you lease a vehicle s, sport utility vehicles GMC Acadia 2009 160,000 one, describe here: Saturn SL1	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any securec Creditors Who Have Claim Current value of the entire property? \$ 5,215.00 Do not deduct secured clathe amount of any secured Creditors Who Have Claim	ims or exemptions. Put claims on Schedule Less Secured by Property Current value of t portion you own? \$
ou con	that someone else driven wans, trucks, tractors of es Make: Model: Year: Approximate mileage: Other information: own or have more than Make: Model: Year:	gal or equitable intereses. If you lease a vehicle s, sport utility vehicles GMC Acadia 2009 160,000 one, describe here: Saturn SL1 2001	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any securec Creditors Who Have Claim Current value of the entire property? \$ 5,215.00 Do not deduct secured claithe amount of any secured Creditors Who Have Claim Current value of the	ims or exemptions. Put claims on Schedule Das Secured by Property Current value of t portion you own? \$ 5,215.0 ms or exemptions. Put claims on Schedule D. is Secured by Property. Current value of the contraction of th

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	First Name Middle Name	Last Name Case number (ii	f known)	
3.3.	Make:	Who has an interest in the property? Check one.	Control of the section of the	
****	Model:	Debtor 1 only	the amount of any secure	ed claims on Schedule
	Year:	Debtor 2 only	Creditors Who Have Clai	ms Secured by Proper
	WHATEH	Debtor 1 and Debtor 2 only	Current value of the	
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own
1	Other information:	1 MAY & Productions	•	
1		☐ Check if this is community property (see instructions)	\$	\$
and the same of th	MANAGE and former former for the part and representative that the property for the property			
3.4. I	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. P
	Model:	Debtor 1 only	the amount of any secure	d claims on Schedule
,	Year:	Debtor 2 only	Creditors Who Have Clair	ns securea by Propen
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of
	Approximate mileage: Other information:	At least one of the debtors and another	ourne brobaith	portion you own
ſ	Outer Information:	☐ Check if this is community property (see	\$	\$
Wiles		instructions)	***************************************	·
Vaterc Exampl	raft, aircraft, motor homes, AT les: Boats, trailers, motors, perso	Vs and other recreational vehicles, other vehicles, and accessonal watercraft, fishing vessels, snowmobiles, motorcycle accesso	sories ries	
Exampl No Yes 4.1. M M	les: Boats, trailers, motors, perso lake: lodel:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured claim the amount of any secured Creditors Who Have Claim	ms or exemptions. Pu claims on Schedule I s Secured by Properly
Example No Yes 4.1. M	des: Boats, trailers, motors, perso Make:	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured claithe amount of any secured Creditors Who Have Claim	ms or exemptions. Pu claims on Schedule I s Secured by Properly Current value of t
Zi No J Yes II. M M	les: Boats, trailers, motors, perso lake: lodel:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clai the amount of any secured Creditors Who Have Claim Current value of the	ms or exemptions. Pu claims on Schedule I s Secured by Property Current value of t
Z No Yes 4.1. M M Y	les: Boats, trailers, motors, perso lake: lodel:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured clai the amount of any secured Creditors Who Have Claim Current value of the	ms or exemptions. Pu claims on <i>Schedule D</i>
No Yes 4.1. M Y O	Make:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the entire property?	ms or exemptions. Puclaims on Schedule Is secured by Properly Current value of the portion you own?
Example No No Yes 4.1. M M YO O	Make: Model: Control Control Months information: Months information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim the amount of any secured	ms or exemptions. Puclaims on Schedule Les Secured by Property Current value of the portion you own? \$
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Yes You ov 1.2. Mi	Make: Model: When or have more than one, list he lake: Lodel: Lode	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Te: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim the amount of any secured Creditors Who Have Claims Current value of the	ms or exemptions. Pur claims on Schedule Is a Secured by Properly Current value of the portion you own? \$
Yes 4.1. M Y O L You ov 1.2. M M Yes	Make: Model: More information: We or have more than one, list he lake:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) The community property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only	Do not deduct secured claim the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured claim the amount of any secured Creditors Who Have Claims Current value of the	ms or exemptions. Puclaims on Schedule Is secured by Properly Current value of the portion you own? \$

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Debtor 1

Stacy Ann Paris

Case number (# known)_

Part 3: Describe Your Personal and Household Items	
Do you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household goods and furnishings	and the many transfer of exemplicins.
Examples: Major appliances, furniture, linens, china, kitchenware	
□ No	
☑ Yes. Describe Washer, dryer, furniture, dishes	\$750.00
7. Electronics	
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scann collections; electronic devices including cell phones, cameras, media players, games	ners; music
No Provide a series of the ser	and control of the Mark Control of the Control of t
Yes. Describe TV, printer, cell phone	\$100.00
8. Collectibles of value	at annual M.E. Tradition from the control of annual transport and annual annua
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No	
Yes. Describe	\$
9. Equipment for sports and hobbies	anninanin'i danya di pangan kanananana ana ana ana ana ana ana an
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, sk and kayaks; carpentry tools; musical instruments	kis; canoes
Yes. Describe	\$
10. Firearms	No. parties in the contract of the contract contract contract contract and contract
Examples: Pistols, rifles, shotguns, ammunition, and related equipment No	
Yes. Describe	\$
11. Clothes	orderen er - eta gerinde plate for und van van de er consensation er en er
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No	
Yes. Describe Clothes, shoes, accessories	\$ 200.00
12. Jewelry	CONTENT OF A CONTE
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches gold, silver	s, gems,
☐ No ☐ Yes. Describe	100.00
Everyday and costume jewelry	\$100.00
3. Non-farm animals	
Examples: Dogs, cats, birds, horses	
No	non-more reconstructive and the state of the
☑ Yes. DescribeBoxer	\$100.00
4. Any other personal and household items you did not already list, including any health alds you did n	not list
☑ No	:
Yes. Give specific	The construction of the co
information,	
5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attact for Part 3. Write that number here	hed \$ 1,250.00
· · · · · · · · · · · · · · · · · · ·	

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Debtor 1

Stacy	Ann	Paris	

Case number (if known)_

	any legal or equitable interest in	any of the following?	portion ye	ict secured claim
16. Cash <i>Examples:</i> Money y	you have in your wallet, in your ho	me, in a safe deposit box, and on hand when you file your petition		
□ No				
		Cash:	\$	25.00
17. Deposits of money Examples: Checkin and othe	g, savings, or other financial accor	unts; certificates of deposit; shares in credit unions, brokerage houses, nultiple accounts with the same institution, list each.		
2 Yes		Institution name:		
	17.1. Checking account:	Rockford Bank & Trust	\$	100.00
	17.2. Checking account:		\$	
	17.3. Savings account:	Rockford Bank & Trust	\$	10.00
	17.4. Savings account:		\$	
	17.5. Certificates of deposit:		\$	
	17.6. Other financial account:			
	17.7. Other financial account:			
	17.8. Other financial account:			
	17.9. Other financial account:	CONTROL OF THE PROPERTY OF THE		
		erage firms, money market accounts		
Tes	Institution or issuer name:			
			\$	·
			\$	
			\$	
. Non-publicly traded an LLC, partnership	stock and interests in incorpor	ated and unincorporated businesses, including an interest in		
. Non-publicly traded an LLC, partnership ☑ No), and joint venture			
an LLC, partnership No Yes. Give specific	o, and joint venture Name of entity:	ated and unincorporated businesses, including an interest in % of ownership: 0%%	\$	
an LLC, partnership No	Name of entity:	% of ownership:	\$ \$	

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Debtor 1 Stacy Ann	Paris	Construction	
First Name		Last Name Case number (if known)	
Government and com			
		ner negotiable and non-negotiable instruments cks, cashiers' checks, promissory notes, and money orders.	
Non-negotiable instrum	ents are those you ca	nnot transfer to someone by signing or delivering them.	
☑ No			
Yes. Give specific	Issuer name:		
information about them			¢

			\$\$
			4
1. Retirement or pension	accounts		
Examples: Interests in II	RA, ERISA, Keogh, 40	01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
☐ No			
Yes. List each	Time of a second	12-19-41	
account separately.	Type of account:	Institution name:	
	401(k) or similar plan:	Morgan Stanley/Oliver Close, LLC Retirement Plan	\$ 52,000.00
	Pension plan:		\$
	IRA:		*
	Retirement account:		\$
			\$
	Keogh:		\$
	Additional account:		\$
	Additional account:		\$
Examples: Agreements v companies, or others	deposits you have ma	ade so that you may continue service or use from a company rent, public utilities (electric, gas, water), telecommunications	
☑ No			
Yes	Inst	itution name or individual:	
	Electric:		\$
	Gas:		\$
	Heating oil:		\$
	Security deposit on renta	al unit:	\$
	Prepaid rent:	The state of the s	\$
	Telephone:		\$
	Water:		•
	Rented furniture:		\$
	Other:		3
			\$
Annuities (A contract for	a pariadia naversat at	manuscriptor (A) of the state o	
No No	a periodic payment of	money to you, either for life or for a number of years)	
☐ Yes	Issuer name and descri	ption:	
	- ANTERIOR DE LA CONTRACTOR DE LA CONTRA		\$
•			\$

Case 16-82514 Doc 1-1 Filed 10/26/16 Entered 10/26/16 13:46:05 Page 15 of 60 Replacement petition Stacy Ann Paris Debtor 1 Case number (# known) 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☑ No 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☑ No ☐ Yes. Give specific information about them.... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements 2

☑ No			
Yes. Give specific information about them			\$
27. Licenses, franchises, and other gene Examples: Building permits, exclusive li	ral intangibles censes, cooperative association holdings, liquor licenses,	professional licenses	unitaria.
☑ No	•	•	
Yes. Give specific information about them			\$
Money or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
8. Tax refunds owed to you		Para garija, Validaria (1900-1904) kalenda (1900-1904).	Carrie of exemplions.
☑ No			
☐ Yes. Give specific information		Federal:	\$
about them, including whether you already filed the returns	ar militario de la companio della companio della companio de la companio della co	State:	\$
and the tax years		Local:	\$
 9. Family support Examples: Past due or lump sum alimon No Yes. Give specific information 	y, spousal support, child support, maintenance, divorce so 2014 past due \$16,000 support/maint 2015 past due \$12,000 support/maint	ettlement, property settlem	s
	2010 past due \$12,000 supportmaint	Maintenance:	\$
	Processor	Support:	\$ 28,000.00
	- Arrivaran	Divorce settlement: Property settlement:	\$
Social Security benefits; unpa	rance payments, disability benefits, sick pay, vacation pay aid loans you made to someone else	The second section of the section	¥
Yes. Give specific information		der AdditionAddissingen Massiconspanierungsprongsprongsprongsprongsprongsprongsprongsprongsprongsprongsprongsp	\$
Official Form 106A/B	Schedule A/B: Property	en e	page 7

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Debtor 1	Stacy Ann Paris		Case number (if known)	
	Pirst Name Middle Name	Last Name	· · · · · · · · · · · · · · · · · · ·	
31 Interests	s in insurance policies			
		nce; health savings account (HS	A); credit, homeowner's, or renter's insurance	
No No			,,,	
Yes.	Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value
				\$
		****		\$
				. \$
If you are	rest in property that is due you the beneficiary of a living trust, e pecause someone has died.	from someone who has died xpect proceeds from a life insur	ance policy, or are currently entitled to receive	
Mo				
Yes. 0	Sive specific information			and continuous
		okurrugin pri prissi i Noko koʻshlooluru oluru rosp orprissi pri i Pristo Vision Vision (Armyr).		\$
Examples	gainst third parties, whether or :: Accidents, employment dispute	not you have filed a lawsuit on significations, insurance claims, or rights to	or made a demand for payment sue	
☑ No				
Yes. [Describe each claim			And Angelogian Control of the Contro
04 0 4b				\$
to set off	itingent and unliquidated claim claims	s of every nature, including c	ounterclaims of the debtor and rights	
	Pescribe each claim.			***************************************
		ennen ennen general en de skrivet en skrivet		\$
No No	cial assets you did not already			\$
6. Add the d	ollar value of all of your entries Write that number here	from Part 4, including any er	ntries for pages you have attached	s 80,000.00
		***************************************	7	*
	sy franchista a a a a a a a a a a a a a a a a a a	er til til er er i den gggg til til sig til er i kalle til er	manus magning of the company manuscripting and the company of the manuscripting of the company o	errenderformative errenderforster er er effektion er
art 5: D	osoriko Any Business D	alatad Bassanta Var. 6.		
	rescribe Ally Business-K	elated Property You O	wn or Have an Interest In. List any r	eal estate in Part 1.
	n or have any legal or equitable	e interest in any business-rel	ated property?	
No. Go	to Part 6.			
Yes. G	o to line 38.			
				Current value of the
				portion you own? Do not deduct secured claims
				or exemptions.
□ No	receivable or commissions you	aiready earned		
Yes. De	accriha	frames and a contract of the party of the first and fundaments are contracted a contract of the first of the production and contract of the first of the party of the party of the first of the party of		ì
- 103. DC	39011DB			s
Office equi	pment, furnishings, and suppli	28.	, december of the second control of the seco	
			ines, rugs, telephones, desks, chairs, electronic devices	
☐ No				
Yes. De	scribe			•
				Ψ

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Case number (if known)

Stacy Ann Paris

Debtor 1

rwat realite	middle Name		
to Marshimana Gardan			
	equipment, supplies you use in business, and tools of your trade		
No Yes. Describe		per p. Cysneyna a recent con e seus consecución colonel foreficiel 4 e 8 é.	
Tes. Describe			\$
		rgen general gerger ster i vad varfordred barder fan van oeke merganelen	a area e marque de
1.Inventory ☐ No -			
Yes. Describe		and a succession of the succes	
			\$
Interests in partnersh	ine or joint vantures		
□ No	ips of John Ventures		
Yes. Describe	Name of entity	V at	
	, and or orange.	% of ownership:	•
		% %	\$
		%	\$ \$

.Customer lists, mailin	g lists, or other compilations		
	include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
□ No			
Yes. Desc	ibe	and the second section of the sect	
			\$
Any business-related	property you did not already list	and a commence of the commence	
☐ No	reports you are not anount not		
Yes. Give specific			œ
information			Ψ
			\$
			\$
			\$
			\$
	A STATE OF THE STA		\$
Add the dollar value of	fall of your entries from Part 5, including any entries for pages you have attach	red	s 0.00
for Part 5. Write that n	umber here	······	\$
the same transport to the control of			
16: Describe An	re Forms and Commenced Miles Based on the Com		
if you own or	y Farm- and Commercial Fishing-Related Property You Own or Have a have an interest in farmland, list it in Part 1.	an interest i	n.
	y legal or equitable interest in any farm- or commercial fishing-related property	/?	
M No. Go to Part 7. ☐ Yes. Go to line 47.			
= 163. OU tO MIE 47.			Egyalatatata pilanasia.
			Current value of the portion you own?
			Do not deduct secured claims
arm animals			or exemptions.
Examples: Livestock, po	ultry, farm-raised fish		
⊒ No			
☐ Yes		***************************************	
			•
l.			\$

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Stacy Ann Paris Debtor 1 Case number (if known) 48. Crops-either growing or harvested O No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed ☐ No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list ☐ No Yes. Give specific information.... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. ☐ Yes. Give specific information..... 0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form 41,315.00 55. Part 1: Total real estate, line 2 5,626.00 56. Part 2: Total vehicles, line 5 1,250.00 57. Part 3: Total personal and household items, line 15 80,000.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 86,876.00 62. Total personal property. Add lines 56 through 61. 86,876.00 Copy personal property total ->

63. Total of all property on Schedule A/B. Add line 55 + line 62.

128,191.00

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Debtor 1	Stacy Ann Pa	aris	
•	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
nited States E	Bankruptcy Court fo	r the: Northern District of II	finois
Case number			
(If known)			

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Identify the Property You Claim as Exempt

1,	. Which set of exempt	ons are you claiming?	Check one only	, even if your spouse	is filing with you.
			=	•	•

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	Brief descripti Schedule A/B	on of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief description:	GMC Acadia	\$ <u>5,215.00</u>	☑ \$ <u>5,200.00</u>	735 ILCS 5/12 1001(b)&(c)
	Line from Schedule A/B:	3		□ 100% of fair market value, up to any applicable statutory limit ■ 750.00 735 LCS 5/12 1001(b)	
	Brief description:	Household goods	\$ <u>750.00</u>	☑ \$ 750.00	735 ILCS 5/12 1001(b)
	Line from Schedule A/B:	6		100% of fair market value, up to any applicable statutory limit	
	Brief description:	Electronics	\$ <u>100.00</u>	☑ \$ 100.00	735 ILCS 5/12 1001(b)
	Line from Schedule A/B:	7		100% of fair market value, up to any applicable statutory limit	
3.		ng a homestead exemption of			
	Subject to adjus	stment on 4/01/16 and every 3 y	ears after that for cases	filed on or after the date of adjustment.)	
		acquire the property covered b	v the exemption within 1	,215 days before you filed this case?	
	☐ No		•	, and and an order	
	□ Vac				

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Debtor 1

Stacy Ann Paris
First Name Middle Name Last Name

Case number (if known)_____

Part 2:

Additional Page

Brief descrip on <i>Schedule</i>	tion of the property and line A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Clothes	\$200.00	2 \$ 200.00	735 ILCS 5/12 1001(a)
Line from Schedule A/B:	11		☐ 100% of fair market value, up to any applicable statutory limit	- Control of the cont
Brief description:	Jewelry	\$100.00		735 ILCS 5/12 1001(b)
Line from Schedule A/B:	12		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Cash	\$25.00	E s 25.00	735 ILCS 5/12 1001(b)
Line from Schedule A/B:	16		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Deposits of Money	\$110.00	☑ s 110.00	735 ILCS 5/12 1001(b)
Line from Schedule A/B:	<u>17</u>		☐ 100% of fair market value, up to any applicable statutory limit	***************************************
Brief description:	Retirement Account	\$52,000.00	2 3	735 ILCS 5/12 1006(a)(b)
Line from Schedule A/B:	21		☐ 100% of fair market value, up to any applicable statutory limit	Saltina
Brief description:	Family Support	\$ 28,000.00		735 ILCS 5/12 1001(g)(4)
Line from Schedule A/B:	29		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description;		\$	□ s	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	Q \$	
Line from Schedule A/B:	Westerman		100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	u s	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	Q \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:	***************************************	\$	- \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your ca	se:			
Debtor 1 Stacy Ann Paris				
First Name Middle	Name Last Name			
Debtor 2 (Spouse, if filing) First Name Middle	Name Last Name			
United States Bankruptcy Court for the: Northern	District of Illinois			
	1 District of militars			
(If known)			☐ Check	if this is an
			amend	led filing
Official Form 106D				
Schedule D: Creditor	's Who Have Claims Secur	ed by Prop	erty	12/15
Be as complete and accurate as possible	. If two married people are filing together, both are e	qually responsible fo	r supplying correc	t
information. If more space is needed, cop additional pages, write your name and ca	y the Additional Page, fill it out, number the entries.	and attach it to this f	orm. On the top of	any
additional pages, write your name and ca	se number (if known).			
1. Do any creditors have claims secured i	by your property?			
No. Check this box and submit this for	m to the court with your other schedules. You have noth	ing else to report on th	is form.	
Yes. Fill in all of the information below	•			
Part 1: List All Secured Claims				
2. List all secured claims if a creditor has r	nore than one secured claim, list the creditor separately		Column B	Column C
for each claim. If more than one creditor h	ias a particular claim, list the other creditors in Part 2.		Value of collateral that supports this	Unsecured portion
As much as possible, list the claims in alpl	nabetical order according to the creditor's name.	The second section of the second section of the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section in the second section is a second section of the second section of the second section is a second section of the sec	claim	If any
2.1 Susan Zimmer	Describe the property that secures the claim:	s 97,101.00	s 82,630.00	.14 471 00
Creditor's Name	pescribe the property that secures the claim:	\$ <u>07,101.00</u>	\$	\$17,777.00
1643 N. Alpine Road	Commercial building located at			
Number Street	1800 17th Avenue, Rockford, IL 61107			
PMB 135	As of the date you file, the claim is: Check all that apply.			
Rockford IL 61107	Contingent Unliquidated			
City State ZIP Code	Disputed			
Who owes the debt? Check one.				
Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	-		
community debt				
Date debt was incurred 11/30/201	Last 4 digits of account number	r kali sali sali sali sali sali sali sali s	line i i referenciate pine unum and promo and question e singuization and contraction and cont	NAS and Green to Artifact and A
2.2	Describe the property that secures the claim:	\$ \$	S\$	<u> </u>
Creditor's Name				
Number Street				
	As of the date you file, the claim is: Check all that apply.	i		
	☐ Contingent			
City State ZIP Code	Unliquidated			
•	☐ Disputed			
Who owes the debt? Check one.	Nature of ilen. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
_	Other (including a right to offset)			
Check if this claim relates to a				

community debt

Date debt was incurred

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

97,101.00

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Stacy Ann Paris Debtor 1 Case number (# known) Column A Column B Column C **Additional Page** Part 1: Amount of claim Value of collateral Unsecured After listing any entries on this page, number them beginning with 2.3, followed portion that supports this Do not deduct the by 2.4, and so forth. claim value of collateral. If any Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent ZIP Code ■ Unliquidated State Disputed Who owes the debt? Check one Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent ■ Unliquidated State ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent City ZIP Code ☐ Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt

Date debt was incurred

Write that number here:

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

97,101.00

97,101.00

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r 1	Stacy Ann Paris First Name Middle Name	Last Name		Case number (if known)
rt 2:	List Others to Be		ot That You Airea	dy Listed
have n	age only if you have othe	ers to be notified about for a debt you owe to any of the debts the	ut your bankruptcy f to someone else, list at you listed in Part t	or a debt that you already listed in Part 1. For example, if a collection the creditor in Part 1, and then list the collection agency here. Similarl 1, list the additional creditors here, If you do not have additional persor
				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street		- Profile	
City		Chab		
ren-sin-aciens	in the second section of the section of the second section of the section of the section by the second section of the section	State **********************************	ZIP Code	war tig father than it. Show when we have been supplied to the control of the con
Name				On which line in Part 1 did you enter the creditor?
				Last 4 digits of account number
Number	Street			
City		State	ZIP Code	
Water and Charles and Charles	and the state of t	\$\$\$\$\$\$ \$\$\dot\rightarrow\rightarr	માં મહિલાનો અને સાધિતામાં જેવન કું કરતા કે મ્યુપોલ્યા કે કેવન કર્યો છે. જેવન કર્યો પણ જેવી કેવન જેવન કેવન કુંગ જેવા માટે જેવન કર્યા કર્યા કર્યા કેવન જેવા કે કેવન કેવન કર્યો કર્યા કર્યા કર્યા કર્યો કર્યો કર્યો કર્યો કર્યો ક	On which line in Part 1 did you enter the creditor?
Vame	2 TO MANY			Last 4 digits of account number
lumber	Street			
City		State	ZIP Code	
	enter i en en en ex en	ાકારિક કારણ કરવાના કરવા કરવાના કરવા કરવા 	a proposition de service de la company de company de c	On which line in Part 1 did you enter the creditor?
ame				Last 4 digits of account number
umber	Street			_
ity		State	ZIP Code	- -
HPCCFIACONCENDED LOCA	ર્જાએના અનાદોર્જાનો ^{મુ} ત્યની ભાગ તે લાકાદાર જેવે બનાવાનો તાનવો મહેતાનું એના પ્રકારના હાત્મા કહીક કરેવા નહી કે કેક્સન			On which line in Part 1 did you enter the creditor?
ame				Last 4 digits of account number
umber	Street			_
				-
ty 		State	ZIP Code	Propriessor - Etterning-postel frantischerken wirderverstehen erhollen der
me	2016-1-1			On which line in Part 1 did you enter the creditor?
::110				Last 4 digits of account number
imber	Street			-
у		State	70 0-4	•
•		Olate	ZIP Code	

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ă Av	Fill in this in	formation to identify y	our case:							
١.	Debtor 1	Stacy Ann Paris					1			
١.		First Name	Middle Name		Last Name					
	Debtor 2 Spouse, if filing)	First Name	Middle Name		Last Name					
1	Jnited States E	Bankruptcy Court for the: N	orthern District	of Illinois						
	Case number (If known)									eck if this is an ended filing
0	fficial F	orm 106E/F								
		ile E/F: Cred	litors W	/ho H	lave U	nseci	ured Clai	ms		12/15
		e and accurate as pos							AL MONDO	
A/I cre nec	st the other B: Property editors with eded, copy of y additional	party to any executory (Official Form 106A/B) partially secured claim the Part you need, fill li pages, write your nam t All of Your PRIORI	contracts or u and on Schedu is that are liste t out, number t e and case nu	nexpired ule G: Ex ed in Sche the entrie mber (if k	leases that co ecutory Contr edule D: Credi s in the boxes nown).	ould result racts and t itors Who	t in a claim. Also Unexpired Leases Have Claims Sec	list executory (Official Form	contracts on 106G). Do no	Schedule It include any ace is
1.	No. Go	ditors have priority un: to Part 2.	secured claims	against	you?					
	☐ Yes.									
	nonpriority a unsecured o	rour priority unsecured isted, identify what type amounts. As much as po claims, fill out the Continu	of claim it is. If a ssible, list the c aation Page of F	a claim ha laims in a Part 1. If n	s both priority phabetical ord nore than one	and nonpri ler accordir creditor hol	ority amounts, list ng to the creditor's lds a particular cla	that claim here	and show both	priority and
	(For an exp	lanation of each type of o	daim, see the in	structions	for this form it	n the instru	ction booklet.)	Total claim	Priority	Nonpriority
)								amount	amount
1.1	<u> </u>			Last 4 d	igits of accour	nt number		\$	\$	\$
	Priority Credit	or's Name			as the debt inc	•				
	Number	Street		*******	as the debt lift	uirear				
				As of the	e date you file,	the claim i	is: Check all that app	oly.		
	City	State	ZIP Code	_	ingent					
	Who incur	red the debt? Check one.		Unliq Disp	uidated					
	Debtor 1			□ Dispi	itea					
	Debtor 2	only and Debtor 2 only			PRIORITY un		laim:			
		and Deptor 2 only one of the debtors and anoti	har		estic support obli	-				
		f this claim is for a com		*****			owe the governmen	t		
		subject to offset?	y acot		is for death or pe cated	ersonal injury	/ white you were			
	□ No	anniect to otiset i								
 ,	☐ Yes									
2		4,4,4,5,4		Last 4 di	aits of accoun	t number		T. Kalani ang kelakat kepadapat perpengan penggalan pen		
	Priority Credito	r's Name			s the debt inc			\$	\$	_ \$
	Number	Street		William We	is the dept lite	uireur "				:
				As of the	date you file,	the claim is	s: Check all that app	y.		
				Conti	-					
	City	State	ZIP Code		uidated					
	Who incurred Debtor 1	ed the debt? Check one.		Dispu	ted					
	Debtor 1 Debtor 2			Type of	PRIORITY uns	secured cla	aim:			et salder in
		and Debtor 2 only			stic support obliç	-				on of A
		ne of the debtors and anoth	er				owe the government			**************************************
	Check if	this claim is for a comm	unity debt	Claim:	s for death or per sated	rsonal injury	while you were			
	Is the claim	subject to offset?								
	□ No □ Yes							-		- I de la companya de

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Debtor 1

Stacy Ann Paris

Case number (# known)

Part 1: Your PRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim **Priority** Nonpriority amount amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent ☐ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were ☐ Check if this claim is for a community debt intoxicated Other. Specify Is the claim subject to offset? ☐ No Yes Last 4 digits of account number ____ __ Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Other. Specify Is the claim subject to offset? ☐ No Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent State ☐ Unliquidated ZIP Code ☐ Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other. Specify_ is the claim subject to offset? ☐ No Yes

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Stacy Ann Paris

Deptor i	First Name Middle Name	Last Na	ma	Case number (if known)	
Part 2				me	
700 March	5V-1				
	any creditors have nonpriority u				
	No. You have nothing to report in to Yes	his part. S	ubmit this form to	the court with your other schedules.	
		A DESCRIP		De SA da partir Sa de Alba Estra De Analis and travala a sent de la proportional a servicia and servicia and s	nere eta el relacione en la cercanida e
non	priority unsecured claim, list the cre	editor sepa	ırately for each cl	cal order of the creditor who holds each claim. If a creditor ha laim. For each claim listed, identify what type of claim it is. Do no m, list the other creditors in Part 3.ff you have more than three n	ot list claims aiready
clair	ms fill out the Continuation Page of	Part 2.			
					Total claim
-1 Aı	ndesite NPL Kirkland 29, LL	C		E	
	npriority Creditor's Name	· <u>·</u>		Last 4 digits of account number 1 1 3 5	\$ 81,728.28
72	201 Wisconsin Ave., Suite 7	25A		When was the debt incurred? 01/13/2016	
Nur	mber Street		***		
	ethesda	MD	20814		
City	•	State	ZIP Code	As of the date you file, the claim is: Check all that apply.	
				Contingent	
	no incurred the debt? Check one.			☐ Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only				
	Debtor 1 and Debtor 2 only At least one of the debtors and another			Type of NONPRIORITY unsecured claim:	
				Student loans	
	Check if this claim is for a commu	nity debt		Obligations arising out of a separation agreement or divorce	
ls t	the claim subject to offset?			that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debt-	•
Z	No			Other. Specify Home Foreclosure/deficiency	•
	Yes				•
2 PA		rayonin (dayan)s 2-5240 (days Albandado)	etjätket selektro veluktorrogus (1995-2000) (2001-2014) telektrogusja		s 253.18
	earl City Elevator, Inc.			Last 4 digits of account number 6 4 1 8 When was the debt incurred? 01/01/2015	\$ 253.18
				When was the debt incurred? 01/01/2015	
PO Num	est Office Box 248			_	
	earl City	IL	61062	As of the date you file, the claim is: Check all that apply.	
City	'	State	ZIP Code		
Wh	o incurred the debt? Check one.			☐ Contingent ☐ Unilquidated	
	Debtor 1 only			Disputed	
	Debtor 2 only				
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another			Student loans	
		. 14		Obligations arising out of a separation agreement or divorce	
	Check if this claim is for a commur	aity debt		that you did not report as priority claims	
	he claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts Other. Specify Propane for home	1
				Other, Specify 1-10pane for home	
Contraction Contraction	T CO	**************************************	e Dirich vo Challando v. v. p. nije no meno ne posopo posopovano v. v. nime na voda posop	$\frac{1}{2} \left(\frac{1}{2} \left$	-Re-cs-s-co-co-co-co-co-co-co-co-co-cs-cs-cs-cs-cs-cs-cs-cs-cs-cs-cs-cs-cs-
Gu	yer & Enichen, P.C./Ann Dit	tmar, Es	sq.	Last 4 digits of account number 9 0 9 5	00 504 64
Nonp	riority Creditor's Name			When was the debt incurred? 10/12/2012	<u>\$26,524.31</u>
	01 Reid Farm Road			THE THE STORES AND TH	
Numb	ber Street Ckford	13	C4444		
City	CRIOIU	State	61114 ZIP Code	As of the date you file, the claim is: Check all that apply.	
-		Jiaid	FIL CODE	☐ Contingent	1
	incurred the debt? Check one.			Unliquidated	S. Cramer
	Debtor 1 only			D Disputed	
	Debtor 2 only				
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another			Student loans	
	Check if this claim is for a commun	ity debt		Obligations arising out of a separation agreement or divorce	TO THE COLUMN TO
is th	e claim subject to offset?			that you did not report as priority claims	7.0
⊠ ′ N				Debts to pension or profit-sharing plans, and other similar debts	

■ No

🔲 Yes

Other, Specify

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Debtor 1

Stacy Ann Paris
First Name Middle N Middle Name

Case number (if known)__

Brent Blair, Esq.			Last 4 digits of account number	s 3,05
Nonpriority Creditor's Name 1 Court Place, Suite 4	04		When was the debt incurred? 06/01/2015	i
Number Street Rockford	IL	61101	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Ched	ck one.		☐ Unliquidated ☐ Disputed	
Debtor 1 only			un Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors as	od another		☐ Student loans	
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim is for	_	!	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset	?		Other Specify	
☑ No ☑ Yes				
Boylan Catholic High S	chool	er en	Last 4 digits of account number	s 6,48
Nonpriority Creditor's Name	Onoor		00/01/0015	V
4000 St. Francis Drive		· · · · · · · · · · · · · · · · · · ·	When was the debt incurred? 08/01/2015	
Rockford	IL.	61103	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check	cone.		☐ Unliquidated ☐ Disputed	
Debtor 1 only			- Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and	d		☐ Student loans	
			Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a	-		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?			other. Specify Childrens' School Tuition	
Mo D				
Tyes	Economical activities and physical physical activities and activities activities and activities activities and activities activities activities and activities activi	PROGRAMO POR AND MEN AND AND AND AND AND AND AND AND AND AN		
Kimberly McKenzie, Esc	3,		Last 4 digits of account number	\$ <u>690</u>
onpriority Creditor's Name 808 W. State St., Suite			When was the debt incurred? 10/01/2012	
Rockford	IL	61101	As of the date you file, the claim is: Check all that apply.	
ity	State	ZIP Code	Contingent	
/ho incurred the debt? Check	one		Unliquidated	
2 Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a	community debt		you did not report as priority claims	
the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
I No			— Oster, openny	

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Debtor 1

Stacy A. Paris

Middle Name Last N

Case number (if known)_

Part 2:

Rockford Orthopedic /	Associates	Last 4 digits of account number 1264	s <u>875</u>
Nonpriority Creditor's Name 324 Roxbury Road Number Street		When was the debt incurred? 12/01/2011	
Rockford	IL 6110	As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code		
Who incurred the debt? Che	rk one	Unliquidated	
Debtor 1 only	on one.	☐ Disputed	
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		Student loans	
At least one of the debtors a	nd another	Obligations arising out of a separation agreement or divorce that	
$oxed{\Box}$ Check if this claim is for	a community debt	you did not report as priority claims	
Is the claim subject to offset	?	Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical bill	
No Yes			
		Last 4 digits of account number 1778	16/
Dr. John Lennox Nonpriority Creditor's Name			\$ <u>16</u> 0
1415 East State Street	, Suite 800	When was the debt incurred? 01/02/2013	
Rockford	IL 6110	As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	Contingent	
Who incurred the debt? Chec	k one.	Unliquidated	
Debtor 1 only		☐ Disputed	
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		☐ Student loans	
At least one of the debtors an		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a	community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	•	Other. Specify medical bill	
Maria No □ Yes			
Dr. Patricia Panzica, Pe	distric Associatos	Last 4 digits of account number	_{\$} _3,000
Nonpriority Creditor's Name	Width Chaabold (Ca		
5727 Strathmoor Drive		When was the debt incurred? 01/01/2008	
Rockford	IL 61107	As of the date you file, the claim is: Check all that apply.	
ity	State ZIP Code	Contingent	
Vho Incurred the debt? Check	one.	Unliquidated	
Debtor 1 only		☐ Disputed	
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and		☐ Student loans	
		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a	community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?		Other. Specify <u>medical bill</u>	
₹ No			

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Debtor 1

Stacy Ann Paris
First Name Middle Nam

Last Name

Case number (if known)

Part 2:

Bellwood Animal Hospita	al		Last 4 digits of account number 1370	\$	603
Nonpriority Creditor's Name 1869 North Bell School F	Road		When was the debt incurred? 06/03/2009		
Number Street Rockford	IL.	61107	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check of	ne.		Unliquidated		
Debtor 1 only			☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors and			Student loans		
			Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a c	ommunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
s the claim subject to offset?			Other Specify Vet Bill		
No No					
Yes					
Rockford Radiology	######################################	ekasilik kilokolu malmani oru maan reepingiin ja reepingiin see ee ka kii ka saa ka kii ka ka malma	Last 4 digits of account number 3486	······································	14
Ionpriority Creditor's Name				Ψ	
2400 North Rockton Aver	nue		When was the debt incurred? 06/03/2008		
Rockford	IL	61103	As of the date you file, the claim is: Check all that apply.		
ity	State	ZIP Code	Contingent		
Vho incurred the debt? Check or	10		Unliquidated		
Debtor 1 only	ic.		☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and a	nother		Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a co	mmunity debt		you did not report as priority claims		
the claim subject to offset?			 Debts to pension or profit-sharing plans, and other similar debts Other, Specify Medical Bill 		
2 No			Other: Specify Wiedical Diff		
] Yes					
Commonwealth Edison	РВСФ (13-14 г) ней войного на поличного на асторожения	Адаганундун алитага алитка именен жанын жанагардырдын борчологун к	Last 4 digits of account number 2051	\$	949.
onpriority Creditor's Name			-		
Post Office Box 60680			When was the debt incurred? 06/01/2015		
umper street Chicago	IL	60680	As of the date you file, the claim is: Check all that apply.		
y	State	ZiP Code	Contingent		
'ho incurred the debt? Check on	•		Unliquidated		
Debtor 1 only	5 .		☐ Disputed		
Debtor 1 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and an	other		Student loans Obligations arising out of a separation agreement or divorce that		
Check If this claim is for a cor	nmunity debt		you did not report as priority claims		
the claim subject to offset?	-		Debts to pension or profit-sharing plans, and other similar debts Other. Specify EleCtric		
ľ No			Other. Specify Electric		

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Debtor 1

Stacy Ann Paris
First Name Middle Na

ne Middle Name La:

Case number (if known)__

	_	,	ч	5	r
	ш				t

Nonpriority Creditor's Name Comcast Centre, 1701 JFK Blvd. Number Street Philadelphia PA 19103 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	
Philadelphia PA 19103 City State ZIP Code Contingent Who incurred the debt? Check one. Debtor 1 only Debtor 2 only As of the date you file, the claim is: Check all that apply. Unliquidated Disputed Type of NONPRIORITY unsecured claim:	
City State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	
Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim is for a community debt Is the claim subject to offset? Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset?	
✓ No Yes	
Nicor Gas Last 4 digits of account number 8816	s 501
Nonpriority Creditor's Name	
Post Office Box 2020 When was the debt incurred? 05/01/2015	
Aurora IL 60507 As of the date you file, the claim is: Check all that apply.	
City State ZIP Code Contingent	
Who incurred the debt? Check one.	
Disputed Disputed	
Debtor 2 only Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only Student loans	
☐ At least one of the debtors and another ☐ Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? ☐ Other. Specify Natural Gas ☐ Yes	
German American Bank Last 4 digits of account number	650
Nonpriority Creditor's Name 809 Cannell Puri Drive, Unit 1 When was the debt incurred? 01/05/2015	
lumber Street Winnebago IL 61088 As of the date you file, the claim is: Check all that apply.	
State ZIP Code Contingent	
Who incurred the debt? Check one. Unliquidated Disputed	
Debtor 1 only	
Debtor 2 only Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	
_	
At least one of the debtors and another Obligations arising out of a separation agreement or divorce that	
At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
At least one of the debtors and another Obligations arising out of a separation agreement or divorce that	

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Debtor 1

Stacy Ann Paris

Last Name

Case number (if known)_

Part 2:

Global Etelecom		Last 4 digits of account number 5649	÷	12
Nonpriority Creditor's Name 3 Easton Oval, Suite 2	10	When was the debt incurred? 04/02/2015	\$	
Number Street Columbus	OH 43	As of the date you file, the claim is: Check all that apply.		
City Who incurred the debt? Check	State ZIP Co			
Debtor 1 only Debtor 2 only		Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors ar	d another	☐ Student loans		
Check if this claim is for a		Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
Is the claim subject to offset'	,	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Bill		
Yes				
Gill's Freeport Disposal	mining the state of the state o	Last 4 digits of account number 3024	\$	8
Nonpriority Creditor's Name Post Office Box 64		When was the debt incurred? 05/01/2015		
lumber Street Freeport	IL 610	As of the date you file, the claim is: Check all that apply.		
City	State ZIP Cox	32		
Who incurred the debt? Check	one	☐ Unliquidated		
Debtor 1 only		☐ Disputed		
Debtor 2 only		Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only		Student loans		
At least one of the debtors and		Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a	community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
s the claim subject to offset? No		Other. Specify Garbage Disposal Service		
J Yes				
Sage Payments Solution	ns	Last 4 digits of account number 4487	\$	60
onpriority Creditor's Name '3 Eglin Parkway, NE, S	Suite 301	When was the debt incurred? $05/01/2015$		
imber Street		As of the date you file, the claim is: Check all that apply.		
ty	State ZIP Code	Contingent Unliquidated		
/ho incurred the debt? Check	one.	Disputed		
Debtor 1 only		•		
Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:		
At least one of the debtors and	another	Student loans		
Check if this claim is for a		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 		
the claim subject to offset?	•	Debts to pension or profit-sharing plans, and other similar debts		
No		Other. Specify Medical Bill		
Yes				

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Debtor 1

Stacy Ann Paris
First Name Middle Name

Case number (# known)_

Dogs		١
LL C.LL	- 1	1

Illinois Tollway			Last 4 digits of account number 5877	\$	289		
Nonpriority Creditor's Name 2700 Ogden Avenue			When was the debt incurred? 07/14/2016	· -			
Number Street Downers Grove IL 60515			As of the date you file, the claim is: Check all that apply.				
City	State	ZIP Code	Contingent				
Who incurred the debt? Check Debtor 1 only	one.		Unliquidated Disputed				
Debtor 2 only			Type of NONPRIORITY unsecured claim:				
Debtor 1 and Debtor 2 only At least one of the debtors and			☐ Student loans				
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
Check if this claim is for a	community debt		Debts to pension or profit-sharing plans, and other similar debts				
Is the claim subject to offset? Id No Yes			☑ Other. Specify_Toll Violations				
St. Anthony Medical Cer	nter	d PRI (PRI) (PRI) - Tan Norw-American property and appropriate	Last 4 digits of account number 6123	<u>\$_2</u>	2,160		
5666 East State Street			When was the debt incurred? 02/04/2008				
Number Street Rockford	IL	61108	As of the date you file, the claim is: Check all that apply.				
Dity	State	ZIP Code	Contingent				
Who incurred the debt? Check of	nne		☐ Unliquidated				
Debtor 1 only			☐ Disputed				
Debtor 2 only			Type of NONPRIORITY unsecured claim:				
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			☐ Student loans				
			Obligations arising out of a separation agreement or divorce that				
Check if this claim is for a c	ommunity debt		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts				
s the claim subject to offset?			Other Specify Medical Bills				
☑ Yes							
Oliver Close, LLC Retiren		MRSIMON U. In Bellet A 400 MRSIMON MISSIMONS Simil In MARGININ A 400 MIL (A)	Last 4 digits of account number	<u>\$</u> 20,	500		
Inpriority Creditor's Name	nent Flan						
124 N. Water Street, Suit	e 300	***************************************	When was the debt incurred? 06/23/2014				
Rockford	IL	61107	As of the date you file, the claim is: Check all that apply.				
ity	State	ZiP Code	Contingent				
Vho incurred the debt? Check or	ne.		☐ Unliquidated ☐ Disputed				
Debtor 1 only			Cioputed				
Debtor 2 only			Type of NONPRIORITY unsecured claim:				
Debtor 1 and Debtor 2 only At least one of the debtors and a	nother		☐ Student loans				
Check If this claim is for a community debt the claim subject to offset?			Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
			Debts to pension or profit-sharing plans, and other similar debts				
			Other Specify				
No No							

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Debtor 1

Stacy Ann Paris

Case number (# known)_

Part 3:

List Others to Be Notified About a Debt That You Aiready Listed

BSI Financial Services			On which entry in Part 1 or Part 2 did you list the original creditor?
314 South Franklin Stre	eet		Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			☑ Part 2: Creditors with Nonpriority Unsecured Claims
Post Office Box 517			Last 4 digits of account number 1 1 3 5
Titusville	PA State	16354 ZIP Code	Last 4 digits of decount number
Rockford Mercantile Ag	relatively the familiar and continue of the second of the	AFF COUR	On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
2502 South Alpine Road	d		Line 4.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Claims 5.0 Part 2: Creditors with Nonpriority Unsecured
Rockford City	IL State	61108 ZIP Code	Last 4 digits of account number 1 2 6 4
Payliance	and the second section of the second second section of the section of the second section of the section of the second section of the se		On which entry in Part 1 or Part 2 did you list the original creditor?
3 Easton Oval, Suite 21	n		Line 5.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street		-1	Part 2: Creditors with Nonpriority Unsecured
Columbus	OH	43219	Claims
Dity National Control of the Contro	State	ZIP Code	Last 4 digits of account number 5 6 4 9
A.R.M. Solutions, Inc.			On which entry in Part 1 or Part 2 did you list the original creditor?
Post Office Box 2929			Line 5.7 of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber Street			Part 2: Creditors with Nonpriority Unsecured Claims
Camarillo	CA	93011	Last 4 digits of account number 3 0 2 4
ity aan oo	State	ZIP Code	
Sage Payment Solutions	s-EFT		On which entry in Part 1 or Part 2 did you list the original creditor?
73 Eglin Parkway NE, S	uite 301		Line 5.8 of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street		NY8644444	Part 2: Creditors with Nonpriority Unsecured
			Claims
Fort Walton Beach	FL State	32548 ZIP Code	Last 4 digits of account number 4 4 8 7
Professional Account Ma	TO COMPANY AND DESCRIPTION OF THE PARTY OF T	company graculture profesiolated dynasis (1977) - Antich J.A. Williams (1974)	On which entry in Part 1 or Part 2 did you list the original creditor?
Post Office Box 698			Line 5.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street			Part 2: Creditors with Nonpriority Unsecured Claims
Milwaukee	WI	53201	Last 4 digits of account number 5 8 7 7
odilis & Associates, P.C	State	ZIP Code	
ame ASSOCIATES, P.C	·		On which entry in Part 1 or Part 2 did you list the original creditor?
5W30 North Frontage R	load, Suite	∋ 100	Line 4.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims
miner 26661			Part 2: Creditors with Nonpriority Unsecured Claims
urr Ridge	IL	60527	Last 4 digits of account number 1 1 3 5
y	State	ZIP Code	

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Debtor 1

Stacy Ann Paris

Case number (if known)_

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total cia	i m
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+\$	0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$	0.00
			Total clair	n
Total claims	6f. Student loans	6f.	\$	0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g,	\$	30,264.31
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	20,500.00
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. •	+ \$	98,455.34
	6j. Total. Add lines 6f through 6i.	6j. [\$	149,219.65

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Fill in thi	s information to i	identify you	ur case:			
	Stacy Ann I	The state of the s	anna (1975)			
Debtor	First Name	allo	Middle Name	Last Name		
Debtor 2	ing) First Name		Middle Name	Last Name		
		staraba, Mor				
United Sta	tes Bankruptcy Court	torthe: Nor	INEM DISTRICT OF I	ilinois		
Case numb (If known)	Der			***************************************		Check if this is ar amended filing
O#:-!-	400					
	Form 106					
Sche	dule G: E	xecu	tory Cor	itracts an	d Unexpired Leases	12/15
informational particular in the control of the cont	n. If more space is pages, write your u have any execu	s needed, o name and story contra	copy the addition case number (in acts or unexpire	nal page, fill it out, f known). d leases?	together, both are equally responsible for sup number the entries, and attach it to this page. It needles. You have nothing else to report on this for	On the top of any
2. List se examp	s. Fill in all of the i parately each pe	nformation I rson or cor	below even if the mpany with who	contracts or leases	are listed on Schedule A/B: Property (Official Form ntract or lease. Then state what each contract or orm in the instruction booklet for more examples of	106A/B).
	or company wit	h whom yo	u have the cont	ract or lease	State what the contract or lease is fo	•
Veriz	on				Cell phone contract that will expire ir	May, 2017.
	East State Str	eet				
Number	Street	·			nunga.	
Rock City	ford	IL State	61107		<u> </u>	
-th-response references to the contract of the	\$201 horasing of the SSM without Notice or commence and general parts.	State	ZIP Code	MATERIAL STATE OF THE STATE OF		المار موارد والمراد والماري و و والماري و و والماري المارية و المارية و المارية و المارية و المارية و المارية و
	A of Rock Rive	r Valley			Health club membership that is mont	h to month.
Name	' Bìvd.					
Number				***************************************		
Rock	ford	IL	61107			
City	iemakkonagkildasiasija ja omarkilonjon jirojinkin vili diastoensee	State	ZIP Code	anter deservations de la proposition de la company de la c	-1000000000000000000000000000000000000	के करें के किया कर पार क्षांत्र कर अन्यान कर कर कर कर के का किया है कि कर कर कर कर कर कर कर कर की किया कर कर क के करें के किया कर पार क्षांत्र कर अन्यान कर
.3					_	
Name						
Number	Street				-	
7.12.				V-00-00-00-00-00-00-00-00-00-00-00-00-00	_	
City	en signification generally per tilling deby the good public of several distributions of the con-	State	ZIP Code	de financia de estrações e estamente esta comiza e esta esta alta atinha a comiza e en acida e en acida e en a Comiza esta en acida en esta en acida e		28/1/04/12 #09/04/14/14/14/14/14/24/7/ #22#46664/24/25/14/3 #0.00/24/2 12/4/04/14/24/A/24/25/04/14/24/A/24/25
.4				***************************************		
Name						
Number	Street					
					_	
City	05.664.5±0009445.066.663.60±00163.6±0; eliver4.66; eliver4.66; eliver4.66; eliver4.66; eliver4.66; eliver4.66;	State	ZIP Code	Chargest by Special by The works a read to the complete process of the complet		MATE TO COMPANY AND AND THE STATEMENT OF
5					_	
Name						
Number	Street				_	
D4.			**************************************		uur-	
City		State	ZIP Code			

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Deb	tor 1	Stacy Ann	n Paris		A
		First Name	Middle Name	Last Name	Case number (if known)
		Additional	Page if You	Have More Cont	tracts or Leases
				SERVICE NAME AND ASSOCIATION	der Here Complex (in the Market) and the contract of the Market and a contract of the contract of the Market o
 	Persor	or compan	y with whom yo	ou have the contra	act or lease What the contract or lease is for
2.2					
	Name			· · · · · · · · · · · · · · · · · · ·	
	Number	Street			The Property of the Contract o
		Oliber			
,	City		State	ZIP Code	
				er ann a' t-ann aire a' gheilleadh ta chainn a' an Amhaille a Aghaill (4 de aide an 1946).	
	Name				
	Number	Street			- NATIONAL AND
	City		State	ZIP Code	WALLE TO THE PARTY OF THE PARTY
		717	an Chillian and Chillian Land Land Chillian (A. T. Seign Sealth Seign Teil (1994) Feight Chillian	Paterthart Collins Colory and and encount in movement a major yearly security of 20	
	Name	w.r.w.r.w.	7-11-2		
	Number	Street			
	INDUIDO	Street			
	City		State	ZIP Code	TABLE A
	ow, even-an-depeth-dressweit	r Continente into esta esta provide provide e e e e e e e e e e e e e e e e e e	o montratamissing somersing well-vision constructly expressionly	માં ત્યારા તેમાં કર્યાં કર્યાં કરતા કારતા કરતા કર્યા કર્યા છે. તેમાં તેમાં તેમાં તેમાં કર્યા કરી તેમાં તેમાં ત	$\frac{1}{2}\left(\frac{1}{2}\right)\right)\right)}{\frac{1}{2}\right)}\right)}{\frac{1}{2}}\right)\right)}\right)}\right)}\right)}\right)}}\right)}}\right)}}}\right)}}}}}}}}$
	Name	w. w.c.			**************************************
	Number	Street			
	City		State	ZIP Code	
-	ekingsikathetianense	METAL (VANCA) AND STAN, SEES PROJECTIVE	indicaja —		
	Name				
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	City	<u> </u>	State	ZIP Code	AND THE PROPERTY OF THE PROPER
April 1	desira processor	Kigerron America (English) Aramata (Anglish)	t i tradition and in the same and an extra properties of the still of	entimentimentimentimentimentimentimentim	
· .	Name				
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7	City	· · · · · · · · · · · · · · · · · · ·	State	ZIP Code	
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١	lame				**************************************
ī	lumber	Street			
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·	ity		State	ZiP Code	4

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		-			
Fill in this infor	rmation to identify	your case:			
Debtor 1 St	acy Ann Paris	Middia Namo			
Debtor 2			Last Name		
(Spause, if filing) Fin		Middle Name	Lasi Name		
_		Northern District of III	•		
Case number (# known)					☐ Check if this is
					amended filing
Official Fo	rm 106H				
Schedule	e M: Your	Codebtor	ICA.		12/15
· · · · · · · · · · · · · · · · · · ·				nay have Person	lete and accurate as possible. If two married peop
case number (if k	(nown). Answer ev	ery question.	en de la companya de	The second of the second facility	he top of any Additional Pages, write your name a
1. Do you have	any codebtors? (ii	i you are filing a joint	case, do not list e	ther spouse as a codel	otor.)
☑ Yes					
2. Within the la	st 8 years, have yo	ou lived in a commu	nity property stat	e or territory? (Comm	unity property states and territories include
Arizona, Calif	fornia, Idaho, Louisi	ana, Nevada, New M	exico, Puerto Rico	, Texas, Washington, a	and Wisconsin.)
No. Go to		spouse, or legal equ	ivalent live with ve	u at the time?	
□ No	, res. apodeo, remo.	oposso, or rogar equ	avalent ave with ye	a at the time:	
Yes. I	n which community	state or territory did y	you live?	Fill in the	e name and current address of that person.
Name o	of your spouse, former spo	ouse, or legal equivalent			
Numbe	ır Street				
City		State	The state of the s	ZIP Code	
3. In Column 1,	list all of your code	e∾t <mark>ors.</mark> Do not inclu	de your spou se a	s a codebtor if your s	pouse is filing with you. List the person
Shown in line Schedule D () 2 again as a code Official Form 106D	bitor only if that per ⋅), <i>Schedule E/F</i> (Off	son is a guaranto ficial Form 106E/f	or or cosigner. Make s F), or Schedule G (Offi	ure you have listed the creditor on cial Form 106G). Use <i>Schedule D</i> ,
Schedule E/F	, or Schedule G to	fill out Column 2.		,,	our on its oo, ose oursules b,
Column 1: Ye	our codebtor			C	olumn 2: The creditor to whom you owe the debt
					heck all schedules that apply:
James J.	Paris				
Name					Schedule D, line 2.1
Number Number	Street Place		T AND A STATE OF THE STATE OF T		Schedule E/F, line
Rockford		<u>IL</u>	6	1108	oonedate o, into
City		State	*****	ZIP Code	e i se i i i i i i i i i i i i i i i i i

City
Official Form 106H

Name

Number

City

Name

Number

3.3

Street

Street

State

ZIP Code

ZIP Code

Schedule D, line

☐ Schedule E/F, line _____

☐ Schedule G, line ____

☐ Schedule D, line _____

☐ Schedule G, line _____

☐ Schedule E/F, line ___

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Debtor 1 Stacy Ann Paris
First Name Middle Name Last Name

Case number (if known)

	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt
_]		Check all schedules that apply:
	Name	Schedule D, line
	Name	Schedule E/F, line
	Number Street	☐ Schedule G, line
	City State	ZIP Code
	Name	Schedule D, line
		☐ Schedule E/F, line
	Number Street	Schedule G, line
]	City State	ZIP Code
	Name	Schedule D, line
		☐ Schedule E/F, line
	Number Street	☐ Schedule G, line
	City State	ZIP Code
,		Schedule D, line
	Name	☐ Schedule E/F, line
ì	Number Street	☐ Schedule G, line
-		
	City State	ZIP Code
_		A STATE OF THE PROPERTY OF THE
_		Schedule D, line
Ī		A STATE OF THE PARTY OF THE PAR
ī	Name	Schedule D, line
ī Ā	Name Number Street City State	Schedule D, line Schedule E/F, line Schedule G, line
ī	Name Number Street	Schedule D, line Schedule E/F, line Schedule G, line ZIP Code Schedule D, line
ī	Name Number Street City State	Schedule D, line Schedule E/F, line Schedule G, line
	Name Number Street City State	Schedule D, line Schedule E/F, line Schedule G, line ZIP Code Schedule D, line Schedule D, line Schedule E/F, line
7 7 7	Number Street City State Name Number Street City State	Schedule D, line Schedule E/F, line Schedule G, line ZIP Code Schedule D, line Schedule D, line Schedule E/F, line Schedule G, line
ī	Name Number Street City State Name Number Street	Schedule D, line Schedule E/F, line Schedule G, line ZIP Code Schedule D, line Schedule E/F, line Schedule G, line Schedule G, line Schedule G, line
IN IO IN	Number Street City State Name Number Street City State	Schedule D, line Schedule E/F, line Schedule G, line ZIP Code Schedule D, line Schedule D, line Schedule E/F, line Schedule G, line Schedule G, line
	Number Street City State Name Number Street City State	Schedule D, line Schedule E/F, line Schedule G, line ZIP Code Schedule D, line Schedule E/F, line Schedule E/F, line Schedule G, line ZIP Code ZIP Code Schedule D, line Schedule E/F, line Schedule E/F, line
	Number Street City State Name Number Street City State Number Street City State	Schedule D, line Schedule E/F, line Schedule G, line ZIP Code Schedule D, line Schedule E/F, line Schedule G, line ZIP Code ZIP Code Schedule D, line Schedule G, line Schedule G, line Schedule D, line
	Number Street City State Name Number Street City State Number Street	Schedule D, line Schedule E/F, line Schedule G, line ZIP Code Schedule D, line Schedule E/F, line Schedule G, line ZIP Code ZIP Code Schedule D, line Schedule G, line Schedule G, line Schedule G, line

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Fill in this information to	identify your case:				
Address of the Address of the Address	en ann an air an tagailt agus an ann an air agus 177 fa 1975 agus				
Debtor 1 Stacy Ann	Paris Middle Name	Last Name			
Debtor 2 (Spouse, if filing) First Name	Middle Name	Local Name			
	ert for the: Northern District of Illinois	Last Name			
	inclorate: Northern District of Illinois	•			
Case number (if known)			Check if		
				mended filing pplement showing postpetition o	hantor 13
				ne as of the following date:	napter 15
Official Form 106I	AND THE PARTY OF T		MM /	DD / YYYY	
Schedule I:	Your Income				12/15
supplying correct informat If you are separated and yo	tion. If you are married and not fi our spouse is not filling with you.	ling jointly, and your do not include inforr	spouse is living with nation about your sp	ofor 2), both are equally responsib you, include information about y ouse. If more space is needed, at known). Answer every question.	our spouse.
Part 1: Describe En	nployment	***			
Fill in your employment information.	ı	Debtor 1		Debtor 2 or non-filing spour	() - () - () - () - () - () - () - () -
if you have more than on attach a separate page w information about addition employers.	vith	☑ Employed ☐ Not employed		☐ Employed ☐ Not employed	
Include part-time, season self-employed work.	eal, or				
Occupation may include s or homemaker, if it applie		Legal Assistant			
	Employer's name	Oliver Close, LL	C	***************************************	
	Employer's address	124 North Wate	r Street	Number Street	
		Suite 300	793 F 2070 V Fall 19 Aff to 1		
		Rockford City St	IL 61107 ate ZIP Code	City State ZIP	Code
	How long employed the	re? <u>17 ye</u> ar	:s		
	About Monthly Income				
spouse unless you are ser If you or your non-filing spe	parated. ouse have more than one emplove	r. combine the informa		rite \$0 in the space. Include your no	n-filing
below. If you need more sp	pace, attach a separate sheet to th	is form.	For Debtor 1	For Debtor 2 or	
0 - 1 last man 1141 lb.				non-filing spouse	
 LIST monthly gross wag- deductions). If not paid m 	es, salary, and commissions (be conthly, calculate what the monthly	fore all payroll wage would be. 2.	\$ 2,496.00	\$	
3. Estimate and list month	ly overtime pay.	3.	+\$ 0.00	+ \$	
4. Calculate gross income.	. Add line 2 + line 3.	4.	\$_2,496.00	\$	

Official Form 106I

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Debtor 1 Stacy Ann Paris First Name Middle Name Last Name		Case number (# kno	wn)	
		and the second second second second second	***************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		For Debtor 1	For Debtor 2 or non-filling spouse	
Copy line 4 here	→ 4.	\$ <u>2,496.00</u>	\$	
5. List all payroli deductions:				
5a. Tax, Medicare, and Social Security deductions	50	. s 348. 00	•	
5b. Mandatory contributions for retirement plans	5a 5b		\$	
5c. Voluntary contributions for retirement plans	5c.	·	\$	
5d. Required repayments of retirement fund loans	5d.	4====	\$	
5e. Insurance	5e.	440.00	\$	
5f. Domestic support obligations	5f.	\$ 0.00	\$	
5g. Union dues		s 0.00	\$	
5h. Other deductions. Specify:	5g.	T 18.4	\$	
	5h.		+ \$	
6. Add the payroli deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h	. 6.	\$ 980.00	\$	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_1,516.00	\$	
8. List all other income regularly received:				
8a. Net income from rental property and from operating a business, profession, or farm				
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	9.5	\$ <u>0.0</u> 0	\$	
8b. Interest and dividends	8a. 8b.	s 0.00	•	
8c. Family support payments that you, a non-filing spouse, or a dependence regularly receive		9	Ψ	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ 1,300.00	\$	
8d. Unemployment compensation	8d.	\$0.00	\$	
8e. Social Security	8e.	\$0.00	\$	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistanthat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	ece 8f.	\$0.00	\$	
8g. Pension or retirement income	8g.	\$ 0.00		
8h. Other monthly income. Specify:	•		3	
	8h.	+\$ <u>0.00</u>	+\$	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_1,300.00	\$	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ 2,816.00	\$ 	\$ 2,816.00
11. State all other regular contributions to the expenses that you list in Sched Include contributions from an unmarried partner, members of your household, you friends or relatives.	<i>ule J.</i> our de	pendents, your roomm	ates, and other	
Do not include any amounts already included in lines 2-10 or amounts that are r Specify:	not ava	ilable to pay expenses	s listed in <i>Schedule J</i> .	s 0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The r Write that amount on the Summary of Your Assets and Liabilities and Certain St	esult i	s the combined monthl	v income	\$\$\$\$\$
13. Do you expect an increase or decrease within the year after you file this fo	rm?			monthly income
☐ Yes. Explain:				

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_	ormation to identify				
Debtor 1	Name of Asset Day in	y your case:			
	Stacy Ann Paris First Name	Middle Name Last Name	Check if this	s is:	
Debtor 2 (Spouse, if filing)	First Name	Middle Name Last Name	An amer	-	to all the control of the
United States Ba	ankruptcy Court for the:	Northern District of Illinois		ement showing post es as of the following	
Case number (If known)			MM / DD		•
((1,1,1,2,1,1)					
Official Fo	orm 106J	***			
Sched	ule J: Yo	ur Expenses			12/15
formation. If r		ossible. If two married people are fill led, attach another sheet to this form			
art 1: D	escribe Your Ho	usehold			
ls this a joint	case?				
No. Go to		separate household?			
□ N		separate nousenoru (
		e Official Form 106J-2, Expenses for S	eparate Household of Debtor 2.		
Do you have	dependents?	□ No	Dependent's relationship to	Dependent's	: Dan dan dan tibu
Do not list Det Debtor 2.	btor 1 and	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	são Pabaucaura	Does dependent live with you?
Do not state th	he dependents'		Son	18	□ No ☑ Yes
			Daughter	_17	□ No
					☑ Yes ☐ No
					I NA
					Yes
					☐ Yes ☐ No
					☐ Yes ☐ No ☐ Yes
expenses of p	people other than	☑ No □ Yes			☐ Yes ☐ No ☐ Yes ☐ No
expenses of p		☑ No ☐ Yes			☐ Yes ☐ No ☐ Yes ☐ No
yourself and	people other than your dependents?	Yes ng Monthly Expenses			☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes
expenses of properties. Estimate your expenses as of collicable date. Jude expense	people other than your dependents? mate Your Ongoi xpenses as of your a date after the ban as paid for with non	☐ Yes ng Monthly Expenses bankruptcy filing date unless you a kruptcy is filed. If this is a suppleme	ntal Schedule J, check the box a know the value of	at the top of the form	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ ase to report I and fill in the
t 2: Estimate your expenses as of a colicable date. Indeed, assistance	people other than your dependents? mate Your Ongoi xpenses as of your a date after the ban as paid for with none and have included	mg Monthly Expenses bankruptcy filing date unless you askruptcy is filed. If this is a supplemental assistance if you lit on Schedule I: Your Income (Office	ntal Schedule J, check the box a know the value of ial Form 106I.)	at the top of the form	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ ase to report a and fill in the
Estimate your expenses as of a plicable date. ude expense h assistance The rental or any rent for the	mate Your Ongoi expenses as of your a date after the ban es paid for with non and have included thome ownership ene ground or lot.	☐ Yes ng Monthly Expenses bankruptcy filing date unless you a kruptcy is filed. If this is a suppleme	ntal Schedule J, check the box a know the value of ial Form 106I.)	at the top of the form	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ ase to report I and fill in the
t 2: Estimate your expenses as of a colicable date, ude expense h assistance. The rental or any rent for the first include the colicable date.	mate Your Ongoi xpenses as of your a date after the ban es paid for with non and have included thome ownership e ne ground or lot. ed in line 4:	mg Monthly Expenses bankruptcy filing date unless you askruptcy is filed. If this is a supplemental assistance if you lit on Schedule I: Your Income (Office	ntal Schedule J, check the box a know the value of ial Form 106I.)	Your exper	Yes No Yes No Yes No Yes ase to report and fill in the
expenses of prourself and y t 2: Estimate your expenses as of a plicable date. Inde expense th assistance The rental or any rent for the If not include 4a. Real est	mate Your Ongoi xpenses as of your a date after the ban es paid for with non and have included home ownership e ne ground or lot. ed in line 4: late taxes	yes mg Monthly Expenses bankruptcy filing date unless you a kruptcy is filed. If this is a supplement assistance if you lit on Schedule I: Your Income (Office Expenses for your residence. Include	ntal Schedule J, check the box a know the value of ial Form 106I.)	Your exper	No Yes No Yes No Yes No Yes No Yes Asset to report and fill in the 1,000.00
t 2: Estimate your expenses as of a colicable date. It does not any rent for the first include the seal est. Ab. Property	mate Your Ongoi xpenses as of your a date after the ban es paid for with non and have included thome ownership e ne ground or lot. ed in line 4: tate taxes y, homeowner's, or re	yes mg Monthly Expenses bankruptcy filing date unless you a kruptcy is filed. If this is a supplement assistance if you lit on Schedule I: Your Income (Office Expenses for your residence. Include	ntal Schedule J, check the box a know the value of ial Form 106I.)	Your exper	Yes No Yes No Yes No Yes ase to report and fill in the

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Debtor 1 Stacy Ann Paris
First Name Middle Name Last Name

Case number (# known)

			Your exp	penses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	150.00
	6b. Water, sewer, garbage collection	6b.	\$	60.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	
	6d. Other. Specify:	6d.	\$	
7.	Food and housekeeping supplies	7.	\$	300.00
8.	Childcare and children's education costs	8.	\$	615.00
9.	Clothing, laundry, and dry cleaning	9.	\$	200.00
10.	Personal care products and services	10.	\$	200.00
11.	Medical and dental expenses	11.	\$	80.00
12.	Transportation. Include gas, maintenance, bus or train fare.		6	250.00
	Do not include car payments.	12.	a	
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	220.00
	15d. Other insurance. Specify:	15d.	\$	
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
10		., .	-	**************************************
10.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19,	Other payments you make to support others who do not live with you.			
;	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	е.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

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ebtor 1 Stacy First Name	Ann Paris Middle Name	Last Name	Case number (# known)		
Other. Specify:				21. + \$	0.00
Calculate your	nonthly expenses.				
22a. Add lines 4	through 21.		22	a. \$_	3,370.00
22b. Copy line 22	! (monthly expenses	for Debtor 2), if any, from Official Form 1	06J-2 22	b. \$_	0.00
22c. Add line 22a	and 22b. The resu	t is your monthly expenses.	22	c. \$_	3,370.00
Calculate your m	onthly net income.				
23a. Copy line 1:	2 (your combined m	onthly income) from Schedule I.	23	a. \$_	2,816.00
23b. Copy your r	nonthly expenses from	om line 22c above.	23	b. \$ _	3,370.00
23c. Subtract yo	r monthly expense:	s from your monthly income.			FF4 OO
The result is	your monthly net in	ocome.	23	c	-,554.00
Do vou expect ar	increase or decre	ase in your expenses within the year a	fter you file this form?		
For example, do y	ou expect to finish p	aying for your car loan within the year or e	to you expect your		
No.					
🛚 Yes. 🛮 Expla	n here:	and the second s	and the second	vandii 1990 (1990)(1990 (1990)(1990 (1990)	
No. Install field					
to corpe ya a					
Vor schare un					

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Fill in this ir	nformation to ide	entify your case:	
Debtor 1	Stacy Ann Pa	ıris	
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States I	Bankruptcy Court fo	r the: Northern District of I	llinois
Case number	(If known)		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended your original forms, you must fill out a new Summary and check the box at the top of this page.	supplying correct d schedules after you file
Part 1: Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$ <u>41,315.00</u>
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 86,876.00
1c. Copy line 63, Total of all property on Schedule A/B	\$ 128,191.00
Part 2: Summarize Your Liabilities	
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	0.00
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,816.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$3,370.00
	1917 ka a rahus Marana manandada manana dan saran mahada mada mada manan

12/15

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Case number (if known)

Stacy Ann Paris
First Name Middle Name

Last Name

Debtor 1

	art 4: Answer These Questions for Administrative and Statistical Records	B	
6	Are you filing for bankruptcy under Chapters 7, 11, or 13?		
	☐ No. You have nothing to report on this part of the form. Check this box and submit this f☐ Yes	form to the court with your other	schedules.
7.	What kind of debt do you have?	k-ng-nakitorumuseunaa noa Ana gijiin n-nahallin hamasa dh etimetrookurilan-ya-tiibat yi 1916 (magiingi hyggilagi	Ridgigg his hy it famoglik karshmits et list dig tribbyd yn i er hy goll gloedlig me'i fanglion fan it hellis han i zingen ezaman
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.	n individual primarily for a personoses, 28 U.S.C. § 159.	nal,
	Your debts are not primarily consumer debts. You have nothing to report on this par this form to the court with your other schedules.	t of the form. Check this box an	d submit
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	come from Official	\$ <u>3,796.00</u>
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:	n termina da da da America en estratorio en estratorio en estratorio en estratorio en estratorio en estratorio	обишти и стави вод што стор обистов на ставите до навражения стор на ставите ставите ставите ставите ставите с
	From Part 4 on Schedule E/F, copy the following:	Total claim	
	9a. Domestic support obligations (Copy line 6a.)	\$0.00	
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00	
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$8	
	9d. Student loans. (Copy line 6f.)	\$	
	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) 	s30,264.31	
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 20,500.00	
	9g. Total. Add lines 9a through 9f.	\$50,764.31	

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	nformation to ider	illy your case.		<i>(2)</i> (4)(4)(4)			
btor 1	Stacy Ann Pa						
btor 2	Lingt (ABING	Middle Name	Last Name				
use, if filing	j) First Name	Middle Name	Lest Name				
ed States	Bankruptcy Court for	the: Northern District	of Illinois				
e number nown)							
						☐ Chec	
						amer	nded filir
fficia	l Form 106	Dec					
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ecl	aration	About an	n Individua	l Debtor's	s Schedu	iles	12/
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ii must t	file this form who	novor vou file bankri	uptcy schedules or ame	anders and an inches		4	
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taining :	money or property	by fraud in connect	tion with a bankruptcy	case can result in fine	es up to \$250,000.	or imprisonment for	un to 26
				case can result in hill	es up to \$250,000,	or imprisonment for	up to z
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Fill in this in	formation to ide	ntify your case:	
Debtor 1	Stacy Ann Pa	aris Mkdle Name	Last Name
Debtor 2			***************************************
(Spouse, if filing)		Middle Name	Last Name
United States I	Bankruptcy Court fo	r the: Northern District of Illi	nois
Case number (If known)	***************************************		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an Individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: Susan Zimmer	Surrender the property.	₩ No
	Retain the property and redeem it.	Yes
Description of Commercial building located at 1800 property securing debt: 17th Avenue, Rockford, IL 61107	Retain the property and enter into a Reaffirmation Agreement.	
g	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	

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Lessor's name: Verizon Description of leased Cell phone property: Lessor's name: YMCA of Rock River Valley Description of leased Health club facility property: Lessor's name: Lessor's name: Description of leased property:	Michael of Car Ca SCAP V 600 Lat Gord S Tu Mouseure
Description of leased Cell phone property: Lessor's name: YMCA of Rock River Valley Description of leased Health club facility property: Lessor's name: Description of leased property: Lessor's name: Description of leased property: Lessor's name: Description of leased property: Lessor's name: No Pescription of leased property: Lessor's name: No Pescription of leased property: Description of leased property:	Manhadole (ar 64 da anno a 600 ann agus agus agus agus agus agus agus agus
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Description of leased property:	
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Description of leased property:	

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Debtor 1 Stacy Ann Paris		į	
First Name Middle Name	Last Name		
pouse, if filing) First Name Middle Name	Last Name	MARTINIA A de Martin Araba mandro	
nited States Bankruptcy Court for the: Northern District o	f Illinois		
ase number known)			☐ Check if this is a
			amended filing
fficial Form 107 tatement of Financial Affai	ried people are filing t	ogether, both are equally responsi	ble for supplying correct
ermation. If more space is needed, attach a sepainber (if known). Answer every question. art 1: Give Details About Your Marital Sta			s, write your name and case
What is your current marital status?			
☐ Married			
During the last 3 years, have you lived anywhere No Yes. List all of the places you lived in the last 3	_		
During the last 3 years, have you lived anywhere	years. Do not include w		Dates Debtor 2 lived there
During the last 3 years, have you lived anywhere No Yes. List all of the places you lived in the last 3 Debtor 1:	pates Debtor 1 Lived there	here you live now.	lived there
During the last 3 years, have you lived anywhere No Yes. List all of the places you lived in the last 3 Debtor 1; 1937 South Weldon Road	pates Debtor 1 Lived there	here you live now. Debtor 2: Same as Debtor 1	lived there
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Did you have any income from employm Fill in the total amount of income you receiv If you are filing a joint case and you have in No Yes. Fill in the details.	ed from all jobs and all bu	sinesses, including part-	time activities.	lendar years?
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$	Wages, commissions, bonuses, tips Operating a business	\$
For last calendar year: (January 1 to December 31,2015	 ✓ Wages, commissions, bonuses, tips ✓ Operating a business 	\$28,613.00	☐ Wages commissions	\$
For the calendar year before that: (January 1 to December 31, 2014	Wages, commissions, bonuses, tips Operating a business	s 27.134.00	Wages, commissions, bonuses, tips	\$
nclude income regardless of whether that in memployment, and other public benefit payr ambling and lottery winnings. If you are filin	this year or the two previonme is taxable. Examples ments; pensions; rental incog a joint case and you have	ious calendar years? s of other income are alin come; interest; dividends e income that you receiv	; money collected from laws red together, list it only once	suits: rovalties: and
nclude income regardless of whether that in unemployment, and other public benefit payr pambling and lottery winnings. If you are filing ist each source and the gross income from a	this year or the two previonme is taxable. Examples ments; pensions; rental incog a joint case and you have	ious calendar years? s of other income are alin come; interest; dividends e income that you receiv	mony; child support; Social ; money collected from laws red together, list it only once	suits: rovalties: and
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nclude income regardless of whether that in nemployment, and other public benefit payr ambling and lottery winnings. If you are filing ist each source and the gross income from a No	this year or the two previous come is taxable. Examples ments; pensions; rental incig a joint case and you have each source separately. De Debtor 1 Sources of Income Describe below.	Gross Income from each source (before deductions)	mony; child support; Social; money collected from laws yed together, list it only once at you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions and exclusions)
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	First Name Middle Name Last Name	***************************************		
t 3:	List Certain Payments You Made B	efore You Filed for Bankru	ptcy	
∖re eit	ther Debtor 1's or Debtor 2's debts primari	ily consumer debts?		
□ No	Neither Debtor 1 nor Debtor 2 has prima "incurred by an individual primarily for a pe	ersonal, family, or household purp	pose."	C. § 101(8) as
	During the 90 days before you filed for ban	nkruptcy, did you pay any credito	r a total of \$6,225* or more?	
	No. Go to line 7.			
	Yes. List below each creditor to whom you paid that creditor child support and alimony. Also, do * Subject to adjustment on 4/01/16 and ever	 Do not include payments for do to not include payments to an att 	omestic support obligations, su- orney for this bankruptcy case.	ch as
1 Ye	s. Debtor 1 or Debtor 2 or both have prima		•	
	During the 90 days before you filed for bank		a total of \$600 or more?	
	☑ No. Go to line 7.			
	Yes. List below each creditor to whom y creditor. Do not include payments alimony. Also, do not include payments	for domestic support obligations	, such as child support and cruptcy case.	ni ngujug Igoraholyanan prakanan c
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	Creditor's Name	<u> </u>	<u> </u>	Mortgage
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	Number Street			Credit card
	Number Street			☐ Credit card☐ Loan repayment
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	Number Street City State ZIP Code			☐ Credit card☐ Loan repayment
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tor 1	Stacy Ann					Case number (# know	val.
	First Name	Middle Name	Lest Name				71
corporagent, such a	ers include your in rations of which the including one for as child support	relatives; any g you are an off or a business y and alimony.	general partners; icer, director, pei you operate as a	relatives of a rson in control	ny general partners; , or owner of 20% o	partnerships of wh r more of their votin	who was an insider? ich you are a general partner; g securities; and any managing or domestic support obligations,
und TC	s. List ali payme	ents to an Insid	ier.	Dates of payment		Amount you still owe	Reason for this payment
Īr	nsider's Name	7 - 11 - 12 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			\$	_ \$	
Ñ	iumber Street		. 17. 17.11.11.11.11.11.		_		
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Ins	ider's Name	·	······································		\$	\$	Include creditor's name
Nu	mber Street			*************************************			
City	y	State	ZIP Code			The second secon	
/ . h.s	***************************************				\$	\$	
insi	ider's Name					1970	
Nun	nber Street	***************************************	DEPOSITION And Advisor about			THE COLUMN	
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City		State	7112 Condo			THE PASSED AND THE PA	

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Debtor 1	Stacy Ann Paris	t Name		Case number (# kno	wn)	
	Line Minnie Jesus Es	і матө				
Part 4:	identify Legal Actions, Repos	session	s, and Foreclosures			
List all	1 year before you filed for bankrup such matters, including personal injur entract disputes.	tcy, were y cases,	you a party in any lawsu small claims actions, divorc	it, court action, or admes, collection suits, pate	ninistrative proceed ernity actions, suppor	ing? t or custody modifications
☐ No ☑ Yes	s. Fill in the details.		rus sanari da karata d			
			of the case	Court or agency		Status of the case
Ca	ase title Andesite NPL v. James	Forec	losure of residential rty.	Winnebago Cour	nty Courthouse	- Pending
<u>.F</u>	Paris & Stacy Paris			400 West State S	St.	On appeal Concluded
Ca	2014 CH 1161			Rockford City Sta	IL 61101 ate ZIP Code	- Concluded
Ca	_{ise title} Stacy Paris v. James	Divore	ce proceeding.	Winnebago Cour	nty Courthouse	- Pending
P	Paris Paris			400 West State Street		On appeal
Ca	se number 2012 D 1257			Rockford City Sta	IL 61101	Concluded
☑ Yes	. Fill in the information below.		Describe the property		Date	Value of the property
	Andesite NPL - Kirkland 29, L	LC_	residential home	75.75.55.55.55.75.75.75.75.75.75.75.75.7	01/13/2016	\$ 139,900.00
	7201 Wisconsin Avenue				NAME OF THE PROPERTY OF THE PR	
	Number Street		Explain what happened			
	Suite 725-A		Property was repossessed. Property was foreclosed.			
	Bethesda MD 208	814	Property was garnish Property was attached	ned.		
	$100\% M_{\odot}^{2} + 100\% M_{\odot}^{2} + 100\%$	hartopolidačan, remensorans	Describe the property	ou, delized, of fevieur	Date	Value of the property
				a yaar a ah a		pictoria de la constitució de
	Creditor's Name					\$
	Number Street		Explain what happened			
	***************************************	***************************************	☐ Property was reposse	essed.	de les t	
	City State ZIP Cod		Property was foreclos Property was garnish			
	City State ZIP Cod		☐ Property was attache		and an other process of the more and the first policy of the process of the contract of the co	e e de constituição de come constituição de la cons

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First Name		Case III	umber (if known)
	Middle Name La	ast Name	
ithin 90 daye b	stara was filed for honbr	mentar did anno another includes a book of	
counts or refus	se to make a payment be	ruptcy, did any creditor, including a bank or finar recause you owed a debt?	ncial institution, set off any amounts from you
No	,	,	
Yes. Fill in the	detaile		
100.1111111111	Gelans.	a Note the party, and the standard responsibility in the second responsibility of the second responsibility of	Distribution for the contract of the contrac
		Describe the action the creditor took	Date action Amount
Creditor's Name			was taken
Cieditoi s Manie			
Number Street			s
Number Street			T
City	State ZIP Code	Last 4 digits of account number: XXXX-	
thin 1 was been			
inin Tyear befo	re you filed for bankrup	ptcy, was any of your property in the possession	of an assignee for the benefit of
No	appointed receiver, a ct	ustodian, or another official?	
No Yes			
Yes			
	- T		
List Certa	ain Gifts and Contribu	utions	
hin 2 waste hafe	era you filed for benieus.		
nin z years ber	ore you filed for bankrup	ptcy, did you give any gifts with a total value of n	nore than \$600 per person?
No			
Voc Eill in the d	lataila far anah mifi		
Yes. Fill in the d	letails for each gift.		
Same and the same of the same	en i di i deserbi e engantega e escal	n (n. 1888). Enn en e	OSSESSE SE
	letails for each gift.	Describe the gifts	Dates you gave Value the cifts
Gifts with a tota	en i di i deserbi e engantega e escal	Describe the gifts	Dates you gave Value the gifts
Gifts with a tota	en i di i deserbi e engantega e escal	Describe the gifts	
Gifts with a tota per person	I value of more than \$600	Describe the gifts	
Gifts with a tota per person	I value of more than \$600	Describe the gifts	
Gifts with a tota per person	I value of more than \$600	Describe the gifts	
Gifts with a tota per person	I value of more than \$600	Describe the gifts	
Gifts with a total per person	I value of more than \$600	Describe the gifts	
Gifts with a total per person	I value of more than \$600	Describe the gifts	
Gifts with a total per person Person to Whom You Number Street	I value of more than \$600	Describe the gifts	
Gifts with a total per person Person to Whom You Number Street	I value of more than \$600 Gave the Gift State ZIP Code	Describe the gifts	
Gifts with a total per person Person to Whom You Number Street	I value of more than \$600 Gave the Gift State ZIP Code	Describe the gifts	
Gifts with a total per person Person to Whom You Number Street City Person's relationsh	State ZIP Code	Describe the gifts	\$\$
Gifts with a total value of the control of the cont	State ZIP Code		the gifts \$\$ \$ Dates you gave Value
Gifts with a total value of the control of the cont	State ZIP Code		\$\$
Gifts with a total value of the control of the cont	State ZIP Code		the gifts \$\$ \$ Dates you gave Value
Gifts with a total per person Person to Whom You Number Street City Person's relationsh Sifts with a total per person	State ZIP Code		the gifts \$\$ \$ Dates you gave Value
Gifts with a total per person Person to Whom You Number Street City Person's relationsh Sifts with a total per person	State ZIP Code		SS
Gifts with a total per person Person to Whom You Number Street City Person's relationsh Sifts with a total per person	State ZIP Code		SS
Gifts with a total per person Person to Whom You Number Street City Person's relationsh Gifts with a total per person	State ZIP Code		SS
Gifts with a total per person Person to Whom You Number Street City Person's relationsh Gifts with a total aper person	State ZIP Code		SS
Gifts with a total per person Person to Whom You Number Street City Person's relationsh Sifts with a total aper person	State ZIP Code		SS
Gifts with a total per person Person to Whom You Number Street City Person's relationsh Sifts with a total aper person	State ZIP Code		SS
Gifts with a total per person Person to Whom You Number Street City Person's relationsh Person to Whom You Person to Whom You Lumber Street	State ZIP Code		SS
Gifts with a total per person Person to Whom You Number Street City Person's relationsh Gifts with a total per person Person to Whom You tumber Street	State ZIP Code State ZIP Code State ZIP Code State ZIP Code		the gifts \$ S Dates you gave the gifts
Person to Whom You Number Street City Person's relationsh	State ZIP Code State ZIP Code State ZIP Code State ZIP Code		the gifts \$ S Dates you gave the gifts

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1 Stacy Ann Paris First Name Middle Name Le	ast Name Case number (# known)	
ithin 2 years before you filed for bankru	uptcy, did you give any gifts or contributions with a total val	ue of more than \$600 to any charity
NoYes. Fill in the details for each gift or col		
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you Value contributed
Cherity's Name		s
		\$
Number Street		
City State ZIP Code		
6: List Certain Losses		
Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your Value of property loss lost
	A. A. BANBATAN BANBATAN BANBAN	\$
List Certain Payments or Trans		
u consulted about seeking bankruptcy o	cy, did you or anyone else acting on your behalf pay or tran or preparing a bankruptcy petition?	
No	eparers, or credit counseling agencies for services required in yo	ur bankruptcy.
Yes. Fill in the details.	Description and value of any property transferred	Date payment or Amount of paymen
Person Who Was Paid		transfer was made
Number Street		\$
City State ZIP Code	Annual control of the	<u>*************************************</u>
Email or website address		
Person Who Made the Payment, if Not You	TOTAL CONTRACTOR CONTR	

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	ist Name		
	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid	-	**************************************	\$
Number Street			\$
	-		
City State ZIP Code	•		
Email or website address			
Person Who Made the Payment, if Not You		Year of the first	
No Yes. Fill in the details.	Description and value of any property transferred	Date payment or	Amount of payme
Person Who Was Paid		transfer was made	
PERSON VALID AVES LAID		đ	
Number Street	-	3	·
	•	1	
City State ZIP Code			
thin 2 years before you filed for bankrup nsferred in the ordinary course of your	made as security (such as the granting of a security interes		
thin 2 years before you filed for bankrup nsferred in the ordinary course of your lude both outright transfers and transfers n not include gifts and transfers that you hav No	business or financial affairs? made as security (such as the granting of a security interes ve already listed on this statement.	st or mortgage on your property or payments received.	erty).
thin 2 years before you filed for bankrup nsferred in the ordinary course of your lude both outright transfers and transfers n not include gifts and transfers that you hav No	business or financial affairs? made as security (such as the granting of a security interes we already listed on this statement. Description and value of property Describe any pro-	st or mortgage on your property or payments received.	erly). Date transfer
thin 2 years before you filed for bankrup nsferred in the ordinary course of your laude both outright transfers and transfers not include gifts and transfers that you have No Yes. Fill in the details.	business or financial affairs? made as security (such as the granting of a security interes we already listed on this statement. Description and value of property Describe any pro-	st or mortgage on your property or payments received.	erly). Date transfer
thin 2 years before you filed for bankrup nsferred in the ordinary course of your lude both outright transfers and transfers n not include gifts and transfers that you hav No Yes. Fill in the details. Person Who Received Transfer	business or financial affairs? made as security (such as the granting of a security interes we already listed on this statement. Description and value of property Describe any pro-	st or mortgage on your property or payments received.	erly). Date transfer
thin 2 years before you filed for bankrup nsferred in the ordinary course of your lude both outright transfers and transfers n not include gifts and transfers that you hav No Yes. Fill in the details. Person Who Received Transfer	business or financial affairs? made as security (such as the granting of a security interes we already listed on this statement. Description and value of property Describe any pro-	st or mortgage on your property or payments received.	erly). Date transfer
thin 2 years before you filed for bankrup insferred in the ordinary course of your lide both outright transfers and transfers in not include gifts and transfers that you have No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code	business or financial affairs? made as security (such as the granting of a security interes we already listed on this statement. Description and value of property Describe any pro-	st or mortgage on your property or payments received.	erly). Date transfer
thin 2 years before you filed for bankrup nsferred in the ordinary course of your lude both outright transfers and transfers in not include gifts and transfers that you hav No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you	business or financial affairs? made as security (such as the granting of a security interes we already listed on this statement. Description and value of property Describe any pro-	st or mortgage on your property or payments received.	erly). Date transfer

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Debtor 1	Stacy Ann			Case number (# known)	
	First Name	Middle Name	Last Name	The state of the s	
40 W ((4)	hin 10 waste haf	inga waw filed for he			
are	a beneficiary? (These are often cal	linkruptey, and you transfer any pro led asset-protection devices.)	perty to a self-settled trust or similar devic	e of which you
Ø		•	,		
	Yes. Fill in the de	etails.			
			Description and value of the p	roperty transferred	Date transfer was made
	Name of trust				
•					
Someone - Magnes and Paggs		Monormonia de la composició de la compos			din in hangumliding displandigestamplery websithen institutional website entities and you in our seekeenske besteller
Part 8	List Certain	r Financial Acco	unts, Instruments, Safe Depo	sit Boxes, and Storage Units	
20. Wit!	nin 1 year before	you filed for bank	ruptcy, were any financial accoun	ts or instruments held in your name, or for	your benefit,
clos	ed, sold, moved	d, or transferred?		-	•
broi	ude checking, s kerade houses. I	ävings, money mai pension funds. cod	rket, or other financial accounts; c operatives, associations, and other	ertificates of deposit; shares in banks, cred	lit unions,
Z :		,	provide a second control of the control	inimitosui siaditationo.	
<u> </u>	Yes. Fill in the d	etails.			
			Last 4 digits of account number		s Last balance before
				Instrument closed, sold, mo or transferred	
	Name of Financial in	estitution	xxxx	Checking	\$
	Number Street			☐ Savings	
			**	Money market	
				☐ Brokerage	
	City	State ZIP Code) Programme de la la composition de la co	Other	war voor teel een een een een een een een een een
	Name of Financial In	stitution	XXXX	Checking	\$
				☐ Savings	
	Number Street			Money market	
				☐ Brokerage	
	City	State ZIP Code		Other	
1 Do v	nu now have or	did you have with	in 4 year hefers year filed for howl-	uptcy, any safe deposit box or other depos	. t
secu	rities, cash, or c	other valuables?	iii i yeai belole you med for banki	uptcy, any safe deposit box or other depos	mory for
₩ N			•		
LI Y	es. Fill in the de	tails.	e e de la comprese d	ranga Diserbia. A Sistem nga seri na sana ana tao Terpaha sana sa sana ana sana sana sa	Karata na karata na manana
			Who else had access to it?	Describe the contents	Do you still have It?
ī	Name of Financial Ins	stitution	None	-	☐ No☐ Yes
	Transferred Hea		Name		
i	Number Street		Number Street		
-					
			City State ZIP Code	***************************************	
•	* Mr.	C4-4- TIS C1-4-			

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Pebtor 1	Stacy Ann Paris	Case number (if known)	
	First Name Middle Name	Last Name	***************************************
		unit or place other than your home within 1 year before you filed for bankruptcy?	
Ø №	o 'es. Fill in the details.		
LJ Y	es. Fill in the details.		Level en
			Do you still have it?
			_
	Name of Storage Facility		Ŭ No
	reaste of our age racinty	ORINO	Yes Yes
	Number Street	Number Street	
		City State ZiP Code	
	City State ZiP Cod	cte	
,	The state of the s	Maria da	
Part 9:	Identify Property You Ho	old or Control for Someone Else	
22 Day			
	old in trust for someone.	hat someone else owns? Include any property you borrowed from, are storing for,	
-	es. Fill in the details.		
		Where is the property? Describe the property Valu	
		y plane man projection and providing and property control for the control of the	
	Owner's Name	\$	***************************************
	Number Street	Number Street	
•			
	City State ZIP Code	City State ZIP Code	
Part 10	Give Details About Enviro		
211	Give Details About Enviro	Onniental information	
or the p	purpose of Part 10, the following o	definitions apply:	
Envir	ronmental law means any federal,	state, or local statute or regulation concerning pollution, contamination, releases of	
hazaı	rdous or toxic substances, wastes	s, or material into the air, land, soil, surface water, groundwater, or other medium,	
		rolling the cleanup of these substances, wastes, or material.	
Site r	neans any location, facility, or pro	operty as defined under any environmental law, whether you now own, operate, or	
	e it or used to own, operate, or uti		
Hazai	rdous material means anything an	n environmental law defines as a hazardous waste, hazardous substance, toxic	
	tance, hazardous material, polluta		
leport a	II notices, releases, and proceeding	ngs that you know about, regardless of when they occurred.	
4 Haa a	the garagemental will a stiffed way	Abelian marks (table and dath Pall and a stable of the Pall and a stable of the Pall and the Pal	
ч. паз а	ny governmentar unit notined you	that you may be liable or potentially liable under or in violation of an environmental law?	
E N	0		
□ Ye	es. Fill in the details.		
		Governmental unit Environmental law, if you know it Date of	6
		Englichmann eine	fnotice
Na	ime of site	Governmental unit	
Nu	ımber Street	Number Street	
		Market and the second s	
		City State ZIP Code	
Cit	CA-A- 710 C1-	-	

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tor 1 Stacy Ann Paris		Case number (if known)	
First Name Middle Name Las	st Name		
Have you notified any governmental unit o	of any release of hazardous material	?	
₩ No			
Yes. Fill in the details.	######################################		and the second section of the
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
	City State ZIP Code		
City State ZIP Code	-		
Control of the Contro		and the second s	and the second of the second o
łave you been a party in any judicial or ac	iministrative proceeding under any	environmental law? Include settlements an	d orders.
☑ No			
Yes. Fill in the details.			and the state of the second second
	Court or agency	Nature of the case	Status of the case
Case title		e kiloku tang di diang digang manang makayan di paniman digan manang panimbahan di didak di makabahan di didak	Arrid, Alary
Case une	Court Name	-	☐ Pending
			On appea
	Number Street	-	Conclude
Case number	-	_	
Case number	City State ZIP Code		
141: Give Details About Your Bus	siness or Connections to Any E		
 □ A sole proprietor or self-employed □ A member of a limited liability com □ A partner in a partnership □ An officer, director, or managing ex 	pany (LLC) or limited liability partne		
☐ An owner of at least 5% of the votir	ng or equity securities of a corporati	on	
No. None of the above applies. Go to P	tout 49		
Yes. Check all that apply above and fill		255.	
	Describe the nature of the business	Employer Identification num	Þ
Business Name		Do not include Social Securi	ty number or ITIN.
		EIN:	
Number Street			04.75.154.157.355.357.355.3
	Name of accountant or bookkeeper	Dates business existed	
		From To	
City State ZIP Code			
	Describe the nature of the business	Employer identification numi	784
Business Name		Do not include Social Securi	y number or ITIN.
		EIN:	
Number Street			
	Name of accountant or bookkeeper	Dates business existed	
			
City State 710 Code		From To	

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	Stacy Ann Paris	Case number	(if known)
ebtor 1	First Name Middle Name Last Name		
		Describe the nature of the business	Employer Identification number
	Business Name		Do not include Social Security number or ITIN.
	Number Street	Name of accountant or bookkeeper	Dates business existed
	City State ZIP Code		FromTo
Withi	in 2 years hafore you filed for hankru	otcy, did you give a financial statement to anyone at	nout your business? Include all financial
	tutions, creditors, or other parties.	ncy, did you give a inicilcial statement to anyone as	out your business? include all illiancial
	lo 'es. Fill in the details below.		
— 1	es. Fill in the details below.	Date issued	
		NAME 13518G (N. 1884)	
1	Name	MM: / DD / YYYY	
I	Number Street		
į	City State ZIP Code		
i	City State ZIP Code		
i	City State ZIP Code		
art 12			
I have answin course 18 U	ve read the answers on this <i>Statemen</i> wers are true and correct. I understan onnection with a bankruptcy case car J.S.C. §§ 152, 1341, 1519, and 3571.	t of Financial Affairs and any attachments, and I ded that making a false statement, concealing propert result in fines up to \$250,000, or imprisonment for	ty, or obtaining money or property by fraud
I have answin co	ve read the answers on this Statement wers are true and correct. I understant onnection with a bankruptcy case car J.S.C. §§ 152, 1341, 1519, and 3571.	d that making a false statement, concealing proper	ty, or obtaining money or property by fraud
I have answin could be used to the use of th	ve read the answers on this Statemen wers are true and correct. I understan connection with a bankruptcy case car J.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1	d that making a false statement, concealing property result in fines up to \$250,000, or imprisonment for Signature of Debtor 2	ty, or obtaining money or property by fraud up to 20 years, or both.
I have answin could be a second as U	ve read the answers on this Statement wers are true and correct. I understant onnection with a bankruptcy case card. S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Date 10/26/2016 you attach additional pages to Your S	d that making a false statement, concealing property result in fines up to \$250,000, or imprisonment for Signature of Debtor 2	ty, or obtaining money or property by fraud up to 20 years, or both.
I have answer in control 18 U	ve read the answers on this Statemen wers are true and correct. I understan connection with a bankruptcy case car J.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1	d that making a false statement, concealing property result in fines up to \$250,000, or imprisonment for Signature of Debtor 2	ty, or obtaining money or property by fraud up to 20 years, or both.
I have answer in control 18 U	ve read the answers on this Statement wers are true and correct. I understand onnection with a bankruptcy case card. S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Date 10/26/2016 you attach additional pages to Your State No.	d that making a false statement, concealing property result in fines up to \$250,000, or imprisonment for Signature of Debtor 2	ty, or obtaining money or property by fraud up to 20 years, or both.
I have answer in control 18 U	ve read the answers on this Statemen wers are true and correct. I understan onnection with a bankruptcy case car J.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 1 Date 10/26/2016 you attach additional pages to Your Signature of Debtor 1 No Yes	statement of Financial Affairs for Individuals Filling for its not an attorney to help you fill out bankruptcy for	ty, or obtaining money or property by fraud up to 20 years, or both.